

INSTITUTE OF SOCIAL
MEDICINE

10, PARKS ROAD,
OXFORD



BURGH OF KILMARNOCK

REPORT

OF THE

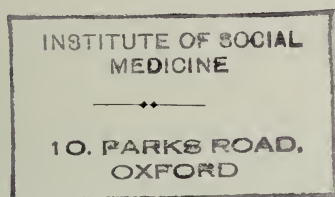
Medical Officer of Health

FOR THE

**YEAR ENDED 31st DECEMBER
1936**

KILMARNOCK
"STANDARD" PRINTING WORKS
1937

BURGH OF KILMARNOCK



ANNUAL REPORT

UPON THE

HEALTH OF KILMARNOCK

FOR THE YEAR 1936

—♦—
BY

B. R. NISBET, M.D., M.R.C.P. (Ed.), D.P.H.

Medical Officer of Health

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PUBLIC HEALTH DEPARTMENT,
KILMARNOCK,
May, 1937.

*To the Provost, Magistrates, and Councillors of the Burgh of
Kilmarnock, and to the Department of Health for Scotland*

GENTLEMEN,

I have the honour to submit to you the Annual Report on the health of the Burgh of Kilmarnock for the year 1936. The Report is drawn up in compliance with the Health Services Circular No. 2 of the Department of Health for Scotland, dated 29th December, 1936.

The main points in the vital statistics of the year were a considerable rise in the Birth Rate and a considerable decline in the Death Rate, both of which must be regarded as very satisfactory. The position in connection with Infantile Mortality and Maternal Mortality on the other hand is not so satisfactory, a small rise taking place in both these rates.

There was no extensive epidemic of Infectious Disease during the year. Puerperal infections caused worry during the early months of 1936 in connection with the Burgh Maternity Home, and it was found necessary to close that Institution for three weeks in March. A localised epidemic of Scarlet Fever in the Grammar School in the latter months of the year is also to be noted.

The work in connection with the Diphtheria Immunisation Campaign continues to be done and the co-operation of the public has been fairly satisfactory.

With regard to Housing, it will be noted that with the extensive programmes carried on by the Corporation since the War years, the Corporation now owns about 25% of all the houses in the Burgh.

Work in connection with the new Burgh Maternity Hospital at Holmes Road has continued during the year, and at the end of the year considerable progress had been made.

I am indebted to Mr. William Dunbar, F.R.Met.Soc., Burgh Surveyor, for the Meteorological Section at the end of the Report.

I take this opportunity of thanking the Staff of the Public Health Department for all the help I have received during the year and for their co-operation in the preparation of this Report. In addition, I should like to thank the Medical Practitioners in the Burgh for their continued co-operation; the Conveners and Members of the Public Health and Housing Committees and Sub-Committees and the other Officials of the Town Council, all of whom have helped in many ways to further the health of the community.

I am, Gentlemen,

Your obedient servant,

B. R. NISBET,

Medical Officer of Health.

BURGH OF KILMARNOCK

Constitution of Committees at 31st December, 1936

PUBLIC HEALTH COMMITTEE.

Convener—BAILIE W. B. TANNAHILL.

Provost H. Smith, C.A., J.P.

Treasurer J. H. Carnie, J.P.

Bailie D. Bowman, J.P.

Councillors H. D. Blackwood, J.P.

Bailie J. Climie, M.A., J.P.

J. Wallace.

Bailie D. Cairns.

H. Wark, J.P.

PUBLIC HEALTH SUB-COMMITTEES.

MATERNITY AND CHILD WELFARE ; WIDOWS', ORPHANS', ETC., PENSIONS ACT ;
AND VENEREAL DISEASES.

Convener—BAILIE J. CLIMIE.

Provost H. Smith ; Bailies D. Bowman and W. B. Tannahill ; Treasurer
J. H. Carnie ; and Councillor H. Wark.

CO-OPTED MEMBERS.

Mrs. Jane F. Garven, Mrs. Margaret Blackwood, Mrs. Jeanie Climie, and
Mrs. M. D. Murchland.

HOSPITALS.

Convener—BAILIE D. CAIRNS.

Provost H. Smith ; Bailies D. Bowman and W. B. Tannahill ; Treasurer
J. H. Carnie ; Councillors J. Wallace and H. Wark.

STAFF.

Medical Officer of Health—

B. R. NISBET, M.D., M.R.C.P. (Ed.), D.P.H.

Assistant Medical Officer of Health—

F. F. MAIN, M.B., Ch.B., D.P.H.

Kirklandside Infectious Diseases Hospital—

* Matron—MISS J. H. FALCONER.

Kaimshill Sanatorium—

** Matron—MISS J. GORDON.

Burgh Maternity Home—

** † Matron—MISS M. B. MCCREATH.

Health Visitors—

** † ‡ MISS M. A. ROBERTSON.

a ** † ‡ MISS M. A. MCCALLUM.

** † ‡ MISS H. P. CAMERON.

** † ‡ MISS C. M. MCLEOD.

*Clerical Staff—**d* MISS A. D. MURRAY.

MISS J. MCINTOSH.

MISS E. GOLDIE.

** State Registered Nurse ; * State Registered Nurse (Fever).

† Certificate of the Central Midwives' Board.

‡ Health Visitor's Certificate.

a Certificate of the Royal Sanitary Institute.*d* Member of the Institute of Hygiene.

Report of the Medical Officer of Health

For the Burgh of Kilmarnock for the Year 1936

WATER SUPPLY

There follows, in tabular form, the main points of interest regarding the Water Supply to the Burgh :—

Name of Supply.	North Craig.	Craigendunton.
Site of gathering grounds ...	District north of town in the Parish of Fenwick.	Uplands of Renfrew- shire-Ayrshire Border.
Extent of gathering grounds	1730 acres.	2390 acres.
Average annual rainfall ...	46 inches.	50 inches.
Capacity of reservoirs ...	138 million gallons.	536 million gallons.
Method of purification ...	Slow sand filtration followed by chlorin- ation.	Rapid gravity filtration.
Total daily consumpt (within Burgh)	2,360,000 gallons.	
Total daily consumpt per Head	59 gallons.	
Domestic	44 gallons.	
Industrial	15 gallons.	

The details of the Analyst's examination of water samples can be seen in the Annual Report of the Sanitary Inspector.

The water supply of the town is of good quality, and there has been no suggestion of any shortage during the year. It must be repeated that our town is very fortunate in possessing such a supply as it does. A first-class water supply is one of the elementary foundations of sound Public Health.

During the Summer, owing to heavy rains on the moorland gathering grounds of the Craigendunton supply, the water became more acid than usual. As it was feared that this water might act on lead pipes, the householders receiving this supply were circularised, advising them to run off any water which might have accumulated overnight in the pipes before beginning to draw the daily supply. Steps were taken immediately to remedy the acidity, and eventually it was decided, in order to obviate any further chance of trouble, that this supply be treated with lime, after the preliminary precipitation and filtration processes.

DRAINAGE AND SEWAGE

During the year there were a few small extensions to the sewers to supply outlying parts of the Burgh as a result of housing development. A large new main sewer was laid in Linfern Avenue to drain a new district, south of London Road.

As the result of a survey made in September, 1936, it was found that there were 69 dry closets within the Burgh boundaries. The number had been increased from 8 to 69 as a result of the Burgh extension of 1935. In 15 instances notices were served for the installation of water closets. In the case of these dry closets not the subject of notice, it was hoped that the persons living in the houses served by the closets would be rehoused in the near future.

OFFENSIVE TRADES

For particulars of work in connection with these Trades the Report of the Sanitary Inspector should be consulted.

HOUSING AND TOWN PLANNING

During 1936, 272 houses were erected, of which number 233 were built by the Local Authority. Up to the end of 1936 the Corporation had built the following houses :—

Under the 1919 Act	...	...	190	
1923 Act	...	...	108	
1923 Act (Rehousing)			36	
1924 Act	...	...	936	
1930 Act (Rehousing)			832	plus Hostel for 16 persons.
1933 Act	...	...	160	
Without Subsidy	...	...	181	
<hr/>				
Total ...	...	...	2443	plus Hostel for 16 persons.
<hr/>				

There were also in course of erection at 31st December, 1936 :—

16 houses under the 1930 Act (Rehousing) and
141 houses without Subsidy.

The Corporation now owns approximately 25% of the houses in the Burgh.

The following figures show the building progress during the last five years :—

Year.	Houses Erected by Local Authority.	Houses Erected by Private Enterprise.	Total.
1932	84	24	108
1933	286	31	317
1934	510	37	547
1935	162	23	185
1936	233	39	272
	1275	154	1429

1275 houses out of 1429 represents 89% of house building.

In addition to the three Areas dealt with as Clearance Areas under the 1930 Act in 1935, one further Area (No. 7) was dealt with as a Clearance Area in 1936. An inquiry was held on this Area on 18th February, 1936, and confirmation of the Clearance Order was received on 7th June, 1936, one property (2 houses) being excluded from the Order.

Three further Areas (4, 5 and 6) were the subject of Compulsory Purchase Orders. Area No. 5 was confirmed without inquiry on 14th August, 1936. An inquiry was held into the Compulsory Purchase Orders relating to Areas Nos. 4 and 6 on 16th, 17th and 18th June. Area No. 6 was confirmed on 8th September, 1936, and Area No. 4 on 30th October, 1936.

By the end of the year all the families, with the exception of a very few, had been satisfactorily rehoused.

The following Table gives the particulars of Areas dealt with so far in the town :—

TABLE No. 1.

No.	Area.	Total Number of Houses in Area.	Number of Houses Demolished or to be Demolished	Number of Persons to be Displaced from Houses to be Demolished.
1	Soulis Street, East George Street and Fore Street (Clearance)	57	57	228
2	New Street (Clearance)	13	13	36
3	Clerk's Lane and No. 20 New Street (Clearance)	14	14	59
4	High Street, Boyd Street, Wellington Street (Compulsory Purchase)	86	86	207
5	High Street (Compulsory Purchase)	9	9	—
6	Boyd Street (Compulsory Purchase)	15	15	41
7	Boyd Street, Dean Lane (Clearance)	12	12	47

In the Annual Report for last year a Scheme for the “decanting” of tenants to relieve overcrowding was mentioned. The Scheme was approved by the Housing and Town Planning Committee on 23rd January, 1936, and has been working well during the year. As a result of the Scheme overcrowding has been relieved on 48 occasions, which must be considered very satisfactory, in view of the fact that only 192 of the new houses built were available for decanting purposes.

During 1936 the complete Survey (with detailed measurements) into the housing conditions in the Burgh, having special regard to overcrowding, was completed. Of the 9866 houses measured 2175 or 22% were overcrowded. The number of houses required to abate overcrowding is calculated to be 380—mainly three and four apartment houses. There will then remain in the calculation a surplus of about a thousand small one and two apartment houses. It was mentioned in the Report for last year that some reconstruction will undoubtedly be possible in the smaller houses, *e.g.*, making two into one, and that this will reduce the actual number of new houses required.

Last year some of the worst cases of overcrowding were noted, and in August of 1936 a Report was made on the housing position pointing out, amongst other things, that there were 11 cases of gross overcrowding in the Burgh—108 persons residing in these houses—none of which was larger than a two apartment.

Of the 2175 overcrowded houses 455 belong to the Local Authority. The full Tables dealing with overcrowding are to be seen in the Report of the Sanitary Inspector on pages 19, 20 and 21.

It must be remembered that we have to add to the overcrowding figures the number of insanitary houses in assessing our total housing requirements. From the information available our total housing requirements are as follows :—

No. of houses overcrowded ...	...	...	...	2175
No. of houses unfit ...	...	...	...	1159

Requirements :—

					<i>Surplus.</i>	<i>Deficiency.</i>
1 apartment ...	...	...	...	...	—	—
2 apartments ...	...	...	...	...	306	—
3 apartments ...	...	...	...	...	—	1061
4 apartments ...	...	...	...	...	—	707
5 apartments ...	...	...	...	...	—	124
6 + apartments ...	...	...	...	...	—	13
					<hr/> 306 <hr/>	<hr/> 1905 <hr/>

Other items of interest with regard to housing problems are as follows :—

In January, 1936, the Housing Committee agreed to supply tenants unable to buy beds and bedding outright, on the hire purchase system—oak bedsteads to cost 26/- and wire spring mattresses to cost 14/9.

Early in the year Sir Alexander Walker handed over a property in Hood Street to the Town Council. This property, consisting of 36 room and kitchen houses, has eventually to be used for housing old couples in receipt of old age pensions at non-economic rents.

During the year it was decided to erect 84 houses on the site of the houses at New Street and Hurlford Road, Riccarton, for the purpose of rehousing persons from houses liable to flooding in the south end of the town.

Shortage of bricklayers held up Schemes in the town during the year, and an interesting innovation was suggested by the Convener of the Housing Committee in the latter part of the year for making the most of the time of the operatives engaged on building. The idea underlying this was to cover, in some way, either by scaffolding and sheets or tarpaulin, certain blocks. In wet weather bricklaying could be carried on under cover, whereas in dry weather work could go on, as at present, on other blocks in the open.

Applications for grants under the Housing (Rural Workers) Scheme, in respect of five dwellings, were received during the year. The applications were granted in respect of three of the houses and refused in two instances.

In connection with the allocation of 152 Non-Subsidy Houses in October, 1936, the Medical Officer of Health was allowed to allocate nine houses to families for health reasons.

The Town Council at their Meeting on 9th September resolved in pursuance of Section 6 of the Town and Country Planning (Scotland) Act, 1932, to prepare a Planning Scheme with reference to the unbuilt-on areas within the extended Burgh. The resolution has since been approved by the Department of Health.

FOOD SUPPLY

Milk.

During the year 34 samples of milk were taken in terms of Section 20 and 21 of the Milk and Dairies (Scotland) Act. The details of the samples can be seen on page 29 of the Annual Report of the Sanitary Inspector for 1936. On one occasion the milk was found to be below standard. This was followed by the taking of a formal sample, when the milk was found to be satisfactory.

36 samples of milk were taken for the inoculation test. In five instances the results were returned as showing that the milk had been infected with tubercle bacilli. The County Veterinary Inspector was communicated with in each instance, and on four occasions he found cows suffering from Tuberculosis of the udder, which were duly dealt with.

A further 16 samples were taken from the farms within the Burgh, and details of these are to be found in the Report of the Sanitary Inspector.

The total amount of milk sold per day in the Burgh is estimated at 2,440 gallons. Compared with the figures found at a survey in 1932 the total daily consumpt is up by 140 gallons (the population in the same period having risen from 38,420 in 1932 to 39,851 in 1936). Of the amount of milk now sold 13 gallons are Certified, 114 are Tuberculin Tested, and 530 are Pasteurised. The daily consumpt of Certified Milk is down 7 gallons from the 1932 figure, the daily consumpt of Tuberculin Tested Milk is up 77 gallons from the 1932 figure, and the consumpt of Pasteurised Milk is up 342 gallons.

Note.—The considerable rise in the Tuberculin Tested Milk consumpt is largely due to the School Milk Scheme.

School Milk.

Details of an investigation into the school milk supply is to be found on pages 31, 32 and 33 of the Report of the Sanitary Inspector.

Meat.

For particulars regarding the work done in the Burgh under the relative Sections of the Public Health (Scotland) Act, 1897 ; the Public Health (Meat) Regulations (Scotland), 1932 ; the Food and Drugs (Adulteration) Acts, 1928 ; and the Public Health (Preservatives, etc., in Food) Regulations, the Report of the Sanitary Inspector should be consulted.

Miscellaneous.

During the year the Empire Marketing Board Poster Frames have again been used by the Public Health Department for displaying health propaganda. Posters have been displayed on the two frames in the Burgh each month, and have dealt with the following subjects :—

Building a Healthy People.
 Do you Use the Health Services.
 Diphtheria Immunisation.
 Balance your Meal.
 Take Care of your Teeth.
 Maternity and Child Welfare.
 The Unfit are a Tax and a Hindrance to the Fit.
 Social Diseases.
 Cleanliness Leads to Health.
 Safeguard your Sight.
 Fresh Air and Sunshine will help to Prevent Tuberculosis.
 Better Homes mean Better Health.

During the year one thousand copies of the magazine, "Better Health," were published monthly under the auspices of the Medical Officer of Health, and distributed mainly to school children.

SUMMARY OF VITAL STATISTICS, 1936

Area	...	...	...	...	...	...	...	...	3,587.5 Acres
Population (Estimated)	...	...	...	...	...	...	...	...	39,851
Inhabited Houses	...	...	...	...	...	...	...	...	10,172

	Corrected Number.	Rate per 1,000 of Estimated Population.
Births (including Illegitimate)	869	21.8
Births Illegitimate	46	5.3 *
Deaths—All Causes	487	12.2 †
Tuberculosis (All Forms)	30	0.75
,, (Respiratory System)	22	0.55
Principal Epidemic Diseases	22	0.55
Children aged under 1 year	72	83.0 †
Children aged under 1 month	35	40.3 †
Women in Childbirth	4	4.6 †

* Rate per 100 Births.

† Rate per 1,000 Births.

‡ Rate adjusted for Age and Sex Distribution—13.2.

TABLE No. 2.

INFECTIOUS OR CONTAGIOUS DISEASES DURING 1936.

	No.	Rate per 1,000 of the Population.
Deaths from Measles	2	0·05
„ Scarlet Fever	4	0·10
„ Whooping Cough	1	0·03
„ Diphtheria	5	0·13
„ Influenza	6	0·16
„ Cerebro-Spinal Fever	4	0·10
„ Tuberculosis (Pulmonary)	22	0·55
„ Tuberculosis (Non-Pulmonary)	8	0·21

TABLE No. 3.

DEATHS FROM SYSTEMIC DISEASES DURING 1936.

	No.	Rate per 1,000 of the Population.
Diseases of the Circulatory System	102	2·56
Diseases of the Respiratory System (Non-Tubercular)	78	1·96
Diseases of the Nervous System	59	1·48
Cancer	45	1·13
Diseases of the Digestive System	31	0·78
Diseases of the Genito-Urinary System	12	0·30

TABLE No. 4.

STATISTICAL FACTS SHOWING KILMARNOCK'S POSITION FOR THE YEAR 1936.

	All Scotland.	Large Burghs.	Kilmarnock.
Birth Rate	17·9	18·7	21·8
Death Rate	13·4	13·8	12·2
Infantile Mortality Rate	82	93	83

VITAL STATISTICS

The Birth Rate, 21·8 per thousand of the population, has not been so high since the year 1923. It shows a sharp rise over the figure for last year (18·8). There were actually 869 Births registered (corrected number), as against 748 in 1935. If the Burgh Rate is compared with the rate for all Scotland, and with the rate for the large Burghs, it is seen to be considerably greater than either of these figures.

The Death Rate, 12·2 per thousand of the population, has only been less on one occasion, namely, in 1920, when the figure was 12·1. It shows a considerable decline from the figure for 1935 which was 13·9. There were actually 487 Deaths in 1936, as against 553 in 1935. If the rate for the Burgh is compared with the rates for all Scotland and the large Burghs, it is found to be considerably less.

Deaths classed as due to diseases of the Circulatory System have, during the last seven years, shown a tendency to increase (rates per thousand of the population), and deaths from diseases of this system have taken first place since 1933. On the other hand deaths from Diseases of the Respiratory System, which from 1930 to 1933 held first place, have shown a slight tendency to decline. Deaths from Diseases of the Nervous System and deaths from Cancer appear to have remained almost stationary during the same period of time. At a lower level there appears to have been a very slight increase in the deaths from Diseases of the Digestive System in recent years, whilst deaths from Diseases of the Genito-Urinary System have remained at the same level.

According to age period the following gives the numbers of deaths in persons normally resident in the Burgh during the past five years:—

Age Group.	No. of Deaths in Group.	Greatest Cause of Death.
Under 1	314	Congenital Debility and Prematurity.
1 and under 5 ...	121	Pneumonia.
5 and under 10 ...	45	Diphtheria.
10 and under 15 ...	23	Accident.
15 and under 25 ...	100	Pulmonary Tuberculosis.
25 and under 35 ...	83	Pulmonary Tuberculosis.
35 and under 45 ...	148	Cancer.
45 and under 55 ...	226	Cancer.
55 and under 65 ...	398	Cancer.
65 and under 75 ...	523	Heart Disease.
75 and under 85 ...	424	Heart Disease.
85 and over ...	99	Heart Disease.

It is of interest to note the main causes of death at each age group.

Under 1 year of age no fewer than 162 of the 314 deaths were due to Congenital Debility, Premature Birth, etc. The next greatest cause of death was Pneumonia, 48 deaths. Diarrhoea caused 23 deaths.

At the Age Group 1 to 5 years, the greatest cause of death was Pneumonia, 20 of the 121 deaths. This was closely followed by Measles, which disease caused 18 deaths. Diphtheria was the next largest cause of death—13 deaths.

At the Age Group 5 to 10 years, there were 45 deaths, the largest individual causes being Diphtheria 7, Accident 6, Appendicitis and Scarlet Fever 4 each.

At the Age Group 10 to 15 years, there were only 23 deaths. This is the age of lowest Mortality. The highest causes of death at this age were Accident 6, Pulmonary Tuberculosis 5.

Coming to the consideration of the Age Group 15 to 25, the large rise in the number of deaths is very striking. It is disquieting to note that the largest cause of death was Pulmonary Tuberculosis, 31 deaths. Pneumonia took second place with 10 deaths. Heart Disease begins to show itself as a relatively important cause of death at this age—9 deaths, and accident continues to cause a goodly number of deaths—8.

The number of deaths in Age Group 25 to 35 was 83. The greatest cause of death at this Age Group was again Pulmonary Tuberculosis with 14 deaths. Pneumonia takes second place with 10 deaths and Heart Disease comes third with 8 deaths.

Age 35 to 45 shows a considerable increase in number—148. The greatest cause of death was Cancer, 19 deaths. Heart Disease took second place with 15 deaths, and Pulmonary Tuberculosis falls to third place with 13 deaths.

At the Age Group 45 to 55 there were 226 deaths. The greatest cause of death was again Cancer—47. Heart Disease caused 36 deaths, and Cerebral Haemorrhage caused 26 deaths.

At the Age Group 55 to 65 the cause of the greatest number of deaths is again Cancer—78. This is closely followed by Heart Disease—72. The deaths from Cerebral Haemorrhage in this Age Group rose to 57.

The Age Group 65 to 75 shows (appropriately) the greatest number of deaths 523. Here the largest groups were Heart Disease 114, Cerebral Haemorrhage 101, and Cancer 96.

At Age Group 75 to 85 (a much smaller group) there were 424 deaths. The same three groups occupied the first three places, viz., Heart Disease 98, Cerebral Haemorrhage 96, and Cancer 42.

At the Age Group 85 and over (a very small group) there were 99 deaths. Heart Disease was once more the greatest cause of death—23. Old age was credited with 20 deaths, Cerebral Haemorrhage with 13 deaths, and Cancer with 5 deaths.

Many interesting points arise from the above review. Pneumonia, for instance, is seen to be an important cause of death in the early years of life. Thereafter, until about age 50, when it again assumes a considerable degree of importance, it is of relatively less importance.

Pulmonary Tuberculosis, negligible in the early years of life, reaches its peak during the years of adolescence and young adult life, and thereafter falls steadily.

Heart Disease from age 35 onwards causes an increasing number of deaths at each Age Group. This is the greatest of all causes of death.

Cerebral Haemorrhage follows a similar course to Heart Disease, but always seems to affect people of a slightly older Age Group, commencing to be of importance in the early forties.

Cancer, on the other hand, affects slightly younger Age Groups than Heart Disease. These last three groups are all responsible for the deaths of many citizens in the prime of life. This is especially so of Cancer.

The following further figures are available regarding Cancer deaths :—

CANCER DEATHS.

	Total Number of Deaths.	Cancer Deaths.	Cancer Deaths as Percentage of Total Deaths.	Cancer Deaths Mean Age.
1921-30	5064	503	9.9	61.7
1932-36	2512	295	11.7	63.4

The figures show that whilst there appears to be some increase in recent years in the proportion of Cancer deaths, this may be partly due to the ageing of the population at risk.

During 1936, 72 deaths occurred in infants under one year of age. The number is 11 more than the figure for the previous year. The Infantile Mortality Rate was 83 and the Neo-Natal Death Rate (deaths in children under one month) was 40. These rates continue to be very high, and whilst they do not compare unfavourably with the rates in other Scottish Burghs, they are much higher than in comparable districts of England.

The number of deaths from the principal Infectious Diseases (22) shows a large decrease over the figure for the previous year (45). This is largely due to a decrease in the number of deaths from Influenza from 21 in 1935 to 6 in 1936.

There were 30 deaths from Tuberculosis during the year as compared with 25 during the previous year. The Death Rate is thus 0.75 per thousand of the population.

There were 4 Maternal Deaths due to Childbirth as against 3 in 1935. The rate per thousand Births is thus 4.6 as compared with 4 for 1935.

The number of deaths from Suicide rose from 2 in 1935 to 5 in 1936, and the number of deaths due to accident or injury rose from 10 in 1935 to 21 in 1936.

The accompanying Graph shows the number of deaths at each Age Group during the past five years for five of the main causes of death, viz. :—

Pneumonia (all forms).
Pulmonary Tuberculosis.
Heart Disease.
Cancer.
Cerebral Haemorrhage.

*Graph Showing deaths at each age group during the past 5 years,
for five of the main causes of death*

Pneumonia (all forms) ———
Pulmonary Tuberculosis - - - - -
Heart Disease - · - · -
Cancer - - - - -
Cerebral Haemorrhage - - - - -

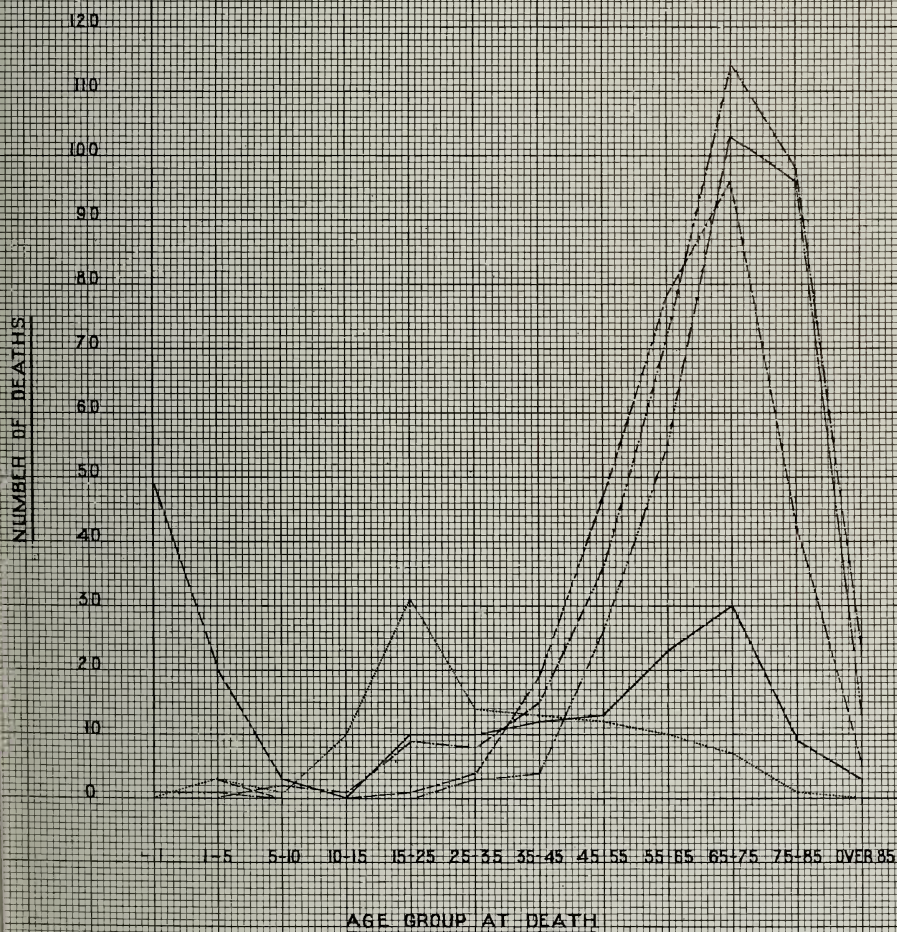


TABLE No. 5.
CAUSES OF DEATH (CORRECTED FOR TRANSFERS).

	Total	All Ages.		1-	5-	10-	15-	25-	35-	45-	55-	65-	75-	85 and over
		Male	Female											
Measles	2	1	1	2	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	4	1	3	2	1	—	1	—	—	—	—	—	—	—
Whooping Cough	1	—	1	1	—	—	—	—	—	—	—	—	—	—
Diphtheria	5	3	2	4	1	—	—	—	—	—	—	2	—	—
Influenza	6	3	3	—	—	—	2	—	—	—	—	—	—	1
Cerebro-Spinal Fever	4	4	—	1	—	—	—	—	—	—	—	—	—	—
Tuberculosis of Respiratory System	22	12	10	—	—	—	6	5	7	1	2	1	—	—
Other Tuberculous Diseases	8	5	3	2	2	—	2	—	—	—	1	—	—	—
Other Infectious and Parasitic Diseases	1	1	—	—	—	—	—	—	—	—	—	—	—	—
Cancer—Malignant Disease	45	15	30	—	—	—	—	—	3	9	15	16	1	1
Diabetes Mellitus	6	1	5	—	—	—	—	—	—	—	2	2	2	—
Other General Diseases—Chronic Poisonings	16	3	13	—	1	—	1	—	3	5	2	3	1	—
Cerebral Haemorrhage, etc.	48	25	23	—	—	—	—	—	—	2	8	14	20	3
Other Diseases of Nervous System and Sense Organs	11	3	8	5	—	—	—	1	1	1	2	2	—	—
Heart Disease	97	51	46	—	1	1	3	4	4	8	19	33	20	4
Other Circulatory Diseases	5	1	4	—	—	—	—	1	—	1	—	1	2	—
Bronchitis	30	14	16	6	—	1	—	1	2	2	4	7	4	3
Pneumonia (all Forms)	41	22	19	11	3	—	1	3	2	5	7	8	1	1
Other Respiratory Diseases	7	5	2	—	—	—	—	1	1	1	2	—	—	—
Gastric and Duodenal Ulcer	4	4	—	—	—	—	—	—	—	—	—	—	—	—
Diarrhoea, etc. (all Ages)	10	6	4	6	—	—	—	—	1	1	2	1	—	—
Appendicitis	6	4	2	—	1	—	1	—	—	2	1	1	—	—
Other Diseases of Liver, etc.	3	1	2	—	—	—	—	—	—	1	2	—	—	—
Other Digestive Diseases	8	4	4	1	—	—	—	—	1	—	—	—	3	—
Acute and Chronic Nephritis	5	3	2	—	—	—	1	—	—	—	1	2	1	—
Other Diseases of Genito—Urinary System	7	4	3	—	—	—	1	2	—	—	—	1	4	1
Puerperal Sepsis	4	—	4	—	—	—	—	—	1	—	—	—	—	—
Diseases of Skin and Locomotor System	4	3	1	3	—	—	—	—	—	1	—	—	—	—
Congenital Debility, Premature Birth, Malformations, etc.	34	18	16	34	—	—	—	—	—	—	—	—	—	—
Old Age	10	5	5	—	—	—	—	—	—	—	—	—	4	6
Suicide	5	3	2	—	—	—	—	1	2	2	—	—	—	—
Other Violence	21	11	10	2	1	1	2	1	—	—	—	1	5	—
Causes Ill-defined or Unknown	7	3	4	—	—	—	—	—	—	2	2	2	1	—
	487	239	248	72	16	3	23	22	33	46	74	96	72	22

INFECTIOUS DISEASES

Total Number of Notifications received during 1936	...	...	...	489
Total Number of Notifications received during 1935	...	...	...	513
Average Number of Notifications received during 1932-36	...	...	...	487

Scarlet Fever.

There were 250 cases of Scarlet Fever notified during the year, an increase of 17 over the figure for the previous year. Notifications were moderately numerous in the first few months of the year, averaging 24 a month. In June, July, August and September the incidence was low. In October there were 50 cases, and thereafter the number of cases diminished steadily until the end of the year. The large number of cases in October was mainly due to a sudden outbreak in one of the Infant Classes in the Grammar School. The unaffected children in this Class were excluded from school for a week, and this brought the outbreak abruptly to an end.

96% of the patients notified were removed to Hospital. There were 4 deaths from Scarlet Fever during the year.

No artificial active immunisation has been carried out in the town, the only work of this nature done was, as noted last year, at the Fever Hospital, where new Probationer Nurses were immunised as found necessary.

Diphtheria.

115 cases of Diphtheria were notified in 1936, as compared with 151 cases during the preceding 12 months. Cases were relatively few throughout the year until September, and then in the three months—September, October and November—almost one-half of the total number were notified. In December cases were again few in number.

100% of the patients were removed to Hospital.

There were 5 deaths during the year, giving a Fatality Rate of 4.4%. This rate is considerably less than it was in the previous two years.

Cases of Diphtheria notified during 1936 in Longpark Area.

Last year attention was drawn to the fact that a relatively large number of cases of Diphtheria had occurred in the above Rehousing Scheme. It was further noted that many of the cases occurred soon after persons had been removed from condemned houses to the new houses in the Schemes. A careful watch has been kept on the position during 1936. Of the 115 cases of Diphtheria notified this year 18 occurred in the Longpark Area, giving an incidence of 0.63% of the population, as against an incidence of 0.27% of the population for the rest of the Burgh. Thinking that the age distribution of the population might have some effect on this incidence, the incidence per cent. of the population (age 1 to 10) was taken out and was found to be 2.56% for Longpark, as against 1.66% for the rest of the Burgh. It is still obvious that the incidence

is considerably greater in Longpark. It is difficult to see why this should be so, as there has not been any undue incidence in any of the other Housing Schemes. Further figures regarding this investigation are as follows :—

	Cases.	Population.	Population Ages 1-10.	Incidence per Cent. of Population.	Incidence per Cent. of Population 1-10.
Longpark ...	18	2891	704	0·63	2·56
Rest of Burgh	97	36,305	5829	0·27	1·66

Extending these figures to show the incidence of Diphtheria in other Schemes we have :—

	Cases.	Population.	Population Age 1-10.	Incidence per Cent. of Population.	Incidence per Cent. of Population Age 1-10.
1. Longpark ...	18	2891	704	0·63	2·56
2. Townholm ...	4	1071	309	0·37	1·28
3. Riccarton West	3	1223	231	0·25	1·29
4. Bonnyton (old)	2	1382	160	0·14	1·25
5. Bellevue ...	1	765	198	0·13	0·51
6. Scott Road ...	1	481	48	0·21	2·08
7. Riccarton East	1	1250	165	0·08	0·61
8. Middleton Park	—	1168	137	—	—
	30	10,231	1952	0·29	1·54
Rest of Burgh ...	85	28,965	4581	0·29	1·86

Immunisation Campaign.

It is pleasant to be in a position to report that the above campaign, begun in May, 1935, is continuing to receive satisfactory support from the people in our town. No attempt has been made at mass publicity, but rather every endeavour has been made by the members of the Public Health Department to draw the attention of members of the public to the value of the scheme, either individually or in small groups.

It is interesting to note that quite a number of other Local Authorities in the country started schemes during 1936.

The main lines of attack were described in last year's Report, and the following figures bring up to date (December, 1936) the data given there.

Up till the end of the year a total of 1780 children had come under treatment by members of the Public Health Staff. A certain number had also been treated by Private Practitioners.

1247 children had been treated in Schools.

488 children had been treated at the Child Welfare Department.

45 children had been treated in the Isolation Hospital.

The ages of the children immunised were as follows :—

1 and under 5 Years.	5 and under 10 Years.	Over 10 Years.
437	1272	71

Reagents.

As before T.A.F. (Toxoid-Antitoxin Floccules) has been used mainly for school children—3 doses of 1 c.c. at fortnightly intervals. For younger children the one shot method, $\frac{1}{2}$ c.c. A.P.T. (Alum-Precipitated Toxoid) was mainly used. Towards the end of the year a number of children were tried on two doses of A.P.T., 0.1 c.c. followed in two weeks by 0.4 c.c. T.A.M. (Toxoid-Antitoxin Mixture) was the reagent issued to the general practitioners—3 doses of 1 c.c. at fortnightly intervals.

The following is the number of children treated with the various reagents :—

T.A.F.	...	...	...	...	...	...	1249
A.P.T.	...	...	...	...	...	...	458

Reactions.

As stated last year these were negligible whatever reagent used.

Results.

Of the 970 children treated with T.A.F., as described, 17 only were Schick Positive three months after. This gives a Schick Negative Rate of 98.2%. Of the 230 children treated with A.P.T. and tested three months afterwards, 12 were Schick Positive. The Schick Negative Rate in this case was 94.8%.

	Ages.	
	1-5 Years.	6-9 Years.
Percentage of known Schick Negative Children in the Burgh	18.2%	18.7%

At the outset this Diphtheria Immunisation Scheme began with the definite plan of treating 60% of the children between the ages of 1 and 10 years in the following 3 years. Judging by the progress made, this result may take somewhat longer to achieve. The time taken is of secondary importance, the main point being that whenever the desired result outlined above takes place we can look for a definite drop in the number of cases of Diphtheria in the community and a drop in the number of deaths from the disease.

CASES NOTIFIED AFTER IMMUNISATION.

Case Number.	1	2	3	4	5
Age	2½	7	8	6	9
Sex	Female	Female	Male	Female	Female
Membrane ...	Nil	Patch on left tonsil	Nil	Patch on left tonsil	Nil
Diagnosis ...	Nasal Diphtheria (+ ve swab)	Clinical Diphtheria (mild) (+ ve swab)	Carrier Throat inflamed (+ ve swab)	Clinical Diphtheria (mild) (+ ve swab)	Carrier (+ ve swab)
Time since immunisation	under 1 month	almost 3 months	Incomplete	Incomplete	14 months
Post Schick Test	Not due	Not due	Not due	Not due	Negative
Material ...	A.P.T.	T.A.F.	T.A.F.	A.P.T.	T.A.F.
Antitoxin ...	6,000 units	10,000 units	4,000 units	8,000 units	None

No case of Diphtheria occurred during the year in a child who was immunised and found to be Post Schick negative.

Erysipelas.

The incidence of this disease was low in 1936, only 11 cases being notified. Only one case occurred in the first four months of the year. Of the 11 patients 10 were over 25 years of age. 3 of the patients were males and 8 females. 4 of the number were removed to hospital. There were no deaths from this disease during the year. The incidence of the disease was lower in 1936 than in any other year for which records are available.

Smallpox.

No case of this disease occurred in the Burgh during the year.

Enteric Fever.

No case of this disease occurred in the Burgh during the year. The last case in the Burgh in which the diagnosis was confirmed occurred in 1933.

Pneumonia.

28 notifications of Acute Primary Pneumonia and 3 of Acute Influenzal Pneumonia were received. The number of notifications of the former disease is considerably less than in 1935. Most of the cases occurred in the colder months—January to March, and October to December. The month of greatest incidence (7 cases) was October. No case was notified in the months of July, August and September.

The 3 cases of Influenzal Pneumonia occurred in December, 1936, when already signs of an extensive outbreak of Influenza were obvious in many parts of the country, although not in our town.

Further particulars as to age, incidence, etc., are to be found in Table No. 7.

During 1936 there were 41 deaths credited to Pneumonia (all forms), and of this number 12 had been notified.

Puerperal Fever and Puerperal Pyrexia.

12 cases of Puerperal Fever and 15 cases of Puerperal Pyrexia were notified in 1936. Of these patients 12 and 4 respectively were removed to hospital.

4 women died of Puerperal Sepsis during the year.

Ophthalmia Neonatorum.

Two notifications of eye inflammation in the new born were received during the year. In one case the condition was mild and the case cleared up satisfactorily without hospital treatment. It is very regrettable that in the case of the other baby, in spite of prompt and energetic hospital treatment, some considerable impairment of the vision in one eye resulted, and this is likely to be permanent. The case has been formally reported to the Department of Health.

Tuberculosis.

50 cases of Tuberculosis were notified in 1936. In 26 instances the notification was in respect of Pulmonary Disease and in 24 instances it was in respect of Non-Pulmonary Disease.

The number is considerably greater than last year, the difference being made up almost entirely by a rise in the Non-Pulmonary figure.

Cerebro-Spinal Fever.

3 cases of this disease were notified during the year, and in each case death took place. The ages of the patients notified were 4 months, 16 years, and 18 years. A fourth death took place from this disease during the year in a patient, aged 2 years, in Kilmarnock Infirmary. This case was not notified.

TABLE No. 6.

INFECTIOUS DISEASES.

NOTIFICATIONS—JANUARY TO DECEMBER, 1936.

Disease.	Dean	Bonnyton	Central	Langlands	Grange	Netherton	Loanhead	Riccarton	Total
Scarlet Fever ...	35	48	32	22	18	33	34	28	250
Diphtheria ...	21	31	14	8	5	2	18	16	115
Erysipelas ...	2	2	2	—	2	—	1	2	11
Puerperal Fever ...	1	—	6	3	—	1	1	—	12
Ophthalmia									
Neonatorum ...	—	—	1	1	—	—	—	—	2
Acute Primary									
Pneumonia ...	7	10	1	3	—	—	3	4	28
Acute Influenzal									
Pneumonia ...	—	—	—	—	1	—	2	—	3
Puerperal Pyrexia ...	1	1	9	1	—	3	—	—	15
Cerebro-Spinal Fever	1	1	—	—	—	1	—	—	3
Tuberculosis									
(Pulmonary) ...	6	6	4	2	1	2	3	2	26
Tuberculosis									
(Non-Pulmonary)	5	8	—	1	3	3	1	3	24
	79	107	69	41	30	45	63	55	489

TABLE No. 7.

AGE INCIDENCE OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR.

	Under 1	1 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards.	Total	Cases removed to Hospital	Cases not removed to Hospital
Scarlet Fever	2	88	130	10	19	1	—	250	241	9
Diphtheria	—	40	58	11	6	—	—	115	115	—
Erysipelas	—	—	1	—	4	3	3	11	4	7
Puerperal Fever	—	—	—	3	9	—	—	12	12	—
Ophthalmia Neonatorum	2	—	—	—	—	—	—	2	1	1
Acute Primary Pneumonia	—	3	7	—	10	7	1	28	13	15
Acute Influenzal Pneumonia	—	—	—	1	2	—	—	3	1	2
Puerperal Pyrexia	—	—	—	4	11	—	—	15	4	11
Cerebro-Spinal Fever ...	1	—	—	2	—	—	—	3	3	—
Pulmonary Tuberculosis...	—	—	6	6	12	1	1	26	21	5
Non-Pulmonary Tuberculosis	2	4	6	9	3	—	—	24	20	4
	7	135	208	46	76	12	5	489	435	54

TABLE No. 8.

TABLE SHOWING THE VARIOUS INFECTIOUS DISEASES DURING THE PAST 4 YEARS.

Months.	Dysentry.	Smallpox.	Acute Polio- Encephalitis.	Acute Polio- Myelitis.	Puerperal Pyrexia.	Cerebro- Spinal Fever.	Puerperal Fever.	Ophthalmia Neonatorum.	Enteric Fever	Erysipelas.	Diphtheria.	Tuberculosis.	Pneumonia (Acute and Influenzal).	Scarlet Fever.	Total.
January	3	...	2	...	...	1	10	4	4	27	51
February	1	1	...	...	...	8	...	3	25	38
March	1	1	...	...	...	...	14	9	4	21	50
April	1	1	2	...	...	...	3	8	2	22	39
May	1	...	...	...	...	2	6	5	2	19	35
June	2	...	1	...	...	2	9	2	2	11	29
July	5	...	2	...	...	...	4	3	...	9	23
August	1	5	2	...	16	24
September	3	...	...	1	19	4	...	15	42
October	1	...	...	16	4	7	50	78
November	1	...	...	...	...	2	15	4	3	22	47
December	1	...	1	1	...	2	6	5	4	13	33
Total 1936	15	3	12	2	...	11	115	50	31	250	489
Total 1935	7	4	3	3	1	22	151	34	55	233	513
Total 1934	7	2	5	5	...	29	61	41	25	154	329
Total 1933	12	2	...	5	2	28	59	55	35	339	537

TABLE No. 9.

TABLE SHOWING COMPARATIVE NUMBER OF INFECTIOUS DISEASES FOR THE PAST TWELVE YEARS
ENDING 31st DECEMBER, 1936.

	Dysentery.	Smallpox.	Polio-Encephalitis.	Polio-Myelitis.	Malaria.	Puerperal Pyrexia.	Chickenpox.	Cerebro-Spinal Fever.	Puerperal Fever.	Ophthalmia Neonatorum.	Enteric Fever.	Erysipelas.	Diphtheria.	Tuberculosis.	Pneumonia (Acute and Influenzal).	Scarlet Fever.	Total.	Patients Hospital. Removed to
1925	5	4	3	35	29	40	73	140	329	142
1926	1	...	1	2	22	25	51	90	156	348	148
1927	128	..	7	2	3	26	29	69	80	186	530	201
1928	27	3	3	2	...	32	54	79	50	180	430	228
1929	3	89	1	4	3	3	40	70	85	68	132	498	283
1930	9	45	...	4	3	7	28	58	89	49	148	440	217
1931	7	36	1	5	6	4	25	99	58	58	188	487	213
1932	1	2	..	5	58	3	6	3	4	16	45	46	52	337	578	355
1933	12	...	2	...	5	2	28	59	55	35	339	537	408
1934	7	..	2	5	5	...	29	61	41	25	154	329	246
1935	7	..	4	3	3	1	22	151	34	55	233	513	374
1936	15	..	3	12	2	...	11	115	50	31	250	489	381

NON-NOTIFIABLE DISEASES

During the year our knowledge of the incidence of these diseases has been kept up (as in the past) by means of weekly returns from the Headmasters of Schools, and weekly returns made by the Health Visitors. The co-operation of the Headmasters in this work is much appreciated.

The following Table gives a resume of the information received. It is to be understood that the Table must needs give only somewhat incomplete information as to the total incidence, especially during the holiday months.

The number of Whooping Cough cases was considerably less than in any year since 1932. There were signs of a considerable outbreak by the end of the year.

Chickenpox was brought to our notice on 249 occasions, and this figure is much greater than that for any recent year. The majority of the cases occurred in the first half of the year, and towards the end of the year there were signs of a greatly diminished incidence of this disease.

Measles was absent from the town at the beginning of 1936. There were a number of cases, mainly in the second quarter of the year, and thereafter until one case occurred in November the town appeared again to be free. December showed a sharp rise in the number of cases, probably the start of a considerable epidemic. There were altogether 92 cases in 1936, as against 2 in 1935 and 902 in 1934.

Mumps gave only 3 cases. The last extensive outbreak of Mumps occurred in the period October, 1932, to March, 1933.

German Measles gave 6 cases. In 1935 the town was free from this disease.

4 cases of Measles, 1 case of German Measles, 1 case of Mumps, and 1 case of Whooping Cough were removed to the Isolation Hospital during the year.

TABLE No. 10.

Disease.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
Whooping Cough	8	21	2	—	9	7	—	—	4	35	46	26	158
Chickenpox ...	53	41	42	23	41	18	—	—	—	6	20	5	249
Measles	—	—	10	2	16	12	8	—	—	—	1	43	92
Mumps	—	—	1	—	—	—	—	—	—	—	2	—	3
German Measles	—	1	—	1	4	—	—	—	—	—	—	—	6
Impetigo	9	—	1	1	1	—	—	—	1	5	3	2	23
Scabies	4	4	2	—	—	—	—	—	3	6	1	1	21
	74	67	58	27	71	37	8	—	8	52	73	77	552

Laboratory Diagnosis.

Pathological Specimens arising from cases of Infectious Disease are examined at the Clinical Research Laboratories, London, or the County Laboratory, Ayr, if the specimens are taken under the Joint Tuberculosis and Venereal Diseases Scheme.

During the year a limited amount of laboratory work has been done by the Public Health Staff, generally in cases of urgency.

Disinfection.

This process is carried out by the Sanitary Department, generally in the houses of the patients.

Immunisation Against Diphtheria and Scarlet Fever.

With regard to active immunisation against Scarlet Fever there is nothing of interest to report during the year.

With regard to Diphtheria, however, the work carried out is detailed under Diphtheria in the Infectious Diseases part of the Report, see page 22.

KIRKLANDSIDE HOSPITAL

The Staff includes :—

- The Matron.
- 2 Sisters.
- 4 Staff Nurses.
- 9 Probationers.

The Medical Officer of Health acts as Medical Superintendent and is responsible for the treatment of patients.

In addition to serving the needs of the Burgh the Hospital serves the surrounding County District. Details of the patients admitted as regards age and area from which admitted, are seen in Table No. 13.

During the year one Sporoclast Dressing Sterilizer (9 $\frac{3}{4}$ in. by 22 in.) and two Chromium-Plated Bowl Sterilizers (24 in. by 18 in. by 14 in.) were installed at the Hospital at a total cost of £85 16s 7d. Also during the year a new "Tullis" Hydro Extractor of 26 in. diameter was installed in the Laundry, at a cost of £82, to replace the former Extractor which had broken down. Further, the internal Telephone System was overhauled during the year.

Scarlet Fever.

339 patients were admitted as suffering from Scarlet Fever, 233 from the Burgh and 106 from the County Area. There were 5 deaths from the disease; one boy aged 1 year died of Toxic Scarlet Fever and one boy aged 6 years died of Scarlet Fever and Diphtheria. One girl aged 4 years died of Septic Scarlet Fever and one girl aged 6 years died of Pneumonia complicating Scarlet Fever. One woman died of Puerperal Scarlet Fever.

The following Table gives the details of some of the more important complications of the patients admitted :—

TABLE No. 11.

	Number.	Percentage of Patients Admitted.
Otorrhoea	33	9.7
Adenitis	30	8.8
Albuminuria	10	2.9
Arthritis	8	2.4
Endocarditis	4	1.2
Rhinitis	4	1.2
Pneumonia	2	0.6

11 patients required surgical treatment for abscesses. The percentage incidence of Otorrhoea and Adenitis during 1936 was considerably higher than in 1935. 3 of the 10 patients classed under Albuminuria had well marked Nephritis.

There were only 6 "return cases" of Scarlet Fever during the year, giving a "return case rate" of 1.8 per cent. These 6 cases arose from 5 patients. 4 of these 5 patients were removed to hospital on or before the third day of illness and 1 on the fifth day. All cases giving rise to "return cases" and all the "return cases" themselves were mildly ill.

Diphtheria.

267 patients were admitted to hospital as suffering from Diphtheria, 120 of the patients being admitted from the Burgh and the remaining 147 from the County Area.

6 patients were admitted as suffering from Laryngeal Diphtheria, and in all the diagnosis was confirmed. On 4 occasions Tracheotomy was necessary. On 3 occasions the child died and on 1 occasion recovery took place. Both patients who did not require Tracheotomy recovered.

In all there were 13 deaths from Diphtheria during the year, giving a fatality rate of almost five, a figure which is considerably less than that for the past few years. In addition to the 3 deaths noted above as being due to Laryngeal Diphtheria 1 was due to Haemorrhagic Diphtheria and the remainder to Toxic Myocarditis.

A note of the various complications encountered follows in Tabular form :—

TABLE No. 12.

COMPLICATIONS.

	Number	Day of Development.	Duration.
Enlarged Glands ...	55	1st to 35th day	3 to 28 days
Rhinitis	24	1st to 35th day	3 to 49 days
Albuminuria	11	1st to 35th day	3 to 42 days
Otorrhoea	3	9th to 28th day	14 to 26 days
Paralysis of Lower Limbs	24	21st to 63rd day	3 to 21 days
Palatal Paralysis ...	16	1st to 70th day	3 to 49 days
Pharyngeal Paralysis ...	4	4th to 42nd day	7 to 14 days
Paralysis of Eye Muscles	2	35th to 42nd day	7 to 14 days

254 patients received Antitoxin during the year. The dosage varied from 2,000 to 130,000 units.

8 patients were received as suffering from Diphtheria during the year who had been immunised or partly immunised before admission. 5 of the cases were from the Burgh and 3 from the County.

An analysis of the Burgh cases is to be found on page 24.

An analysis of the County cases gives the following particulars :—

- (1) Male, aged 10—admitted one week after an injection—severe throat condition with enlarged glands—culture negative.
- (2) Female, aged 12—admitted one week after second injection—left tonsil patched—culture negative.
- (3) Male, aged 12—admitted six weeks after third injection—moderately severe throat condition—culture positive.

The investigation into the colour of the hair of patients admitted to the Hospital was continued during the year. As was pointed out in the Annual Report for last year the number of fair children admitted amounted to 60% of the total. This year, however, the number of fair children admitted was approximately 50%. As was pointed out last year a control investigation outside showed that in the ordinary population about 45% were fair. The difference then this year was not so marked as that for the previous year.

Enteric Fever.

One patient was admitted from the County Area as suffering from Typhoid Fever. The diagnosis was confirmed and the man made an uneventful recovery.

One patient was admitted as ? Paratyphoid Fever. The youth proved eventually to be suffering from Acute Pulmonary Tuberculosis.

Erysipelas.

Eight patients were admitted as suffering from Erysipelas. On five occasions the patients were suffering from Erysipelas and on each occasion the condition affected the face. The five patients were all females and the ages were 9 years, 32 years, 38 years, 38 years, and 46 years. Two patients were found to be suffering from severe skin conditions (Eczema), and on one occasion the condition was deep seated sepsis in the thigh.

The stay in Hospital varied from 8 days to 44 days.

Puerperal Fever.

18 patients were admitted as suffering from Puerperal infections. There were two deaths from Septicaemia. The other cases were mainly moderately severe local infections and in two cases breast abscesses developed. Two of the patients showed a rash. (Prontosil was used in the treatment of the last two cases admitted 8/9/36 and 24/12/36. The former was a Septicaemia with positive Blood Cultures—she died. The latter did very well. It is possible that the dosage of Prontosil used in the former was inadequate.)

Cerebro-Spinal Fever.

Four patients were admitted as suffering from Cerebro-Spinal Fever, and one patient sent in as suffering from Scarlet Fever proved to be a case of Cerebro-Spinal Fever.

All the cases had Meningococci present in the Cerebro-Spinal fluid. A male aged 4 months, a male aged 18 years, a male aged 16 years, and a female aged 4 years were treated with Meningococcus Antitoxin. The child aged 4 died on the day after admission. The other three patients responded very well to the Antitoxin, but all relapsed after a period of 10 to 15 days and died. The fifth case, a baby of 5½ months, was treated with Anti-Meningoccal Serum. She recovered.

Other Diseases.

For particulars of the numbers, ages, etc., of other patients treated in Hospital during the year, reference should be made to Table No. 13.

TABLE No. 13.

THE WORK OF THE HOSPITAL.

35

Disease.	No. in Hospital.	Admissions during the Year.					Patient Days.		Discharges.	Deaths.	No. in Hospital.
		Under 5	5 and under 15	15 and over	Total	Burgh.	County	Burgh.			
Scarlet Fever ...	32	114	178	47	339	233	106	8111	343	5	23
Diphtheria ...	34	62	159	46	267	120	147	4467	257	13	31
Erysipelas ...	3	2	2	4	8	5	3	56	10	—	1
Typhoid Fever ...	—	—	—	1	1	—	1	—	1	—	—
Para-Typhoid Fever	—	—	—	1	1	1	—	31	1	—	—
Puerperal Fever ...	—	—	—	18	18	18	—	319	15	2	1
Acute Primary Pneumonia ...	—	1	—	3	4	2	2	30	2	1	1
Acute Influenzal Pneumonia ...	1	—	—	1	1	1	—	10	—	1	1
Cerebro-Spinal Fever... ..	—	3	—	2	5	3	2	18	1	4	—
Measles	—	3	1	1	5	4	1	109	3	1	1
German Measles ...	—	—	—	1	1	1	—	5	1	—	—
Scarlet Fever and Chickenpox ...	—	9	—	—	9	6	3	177	9	—	—
Whooping Cough ...	—	—	1	—	1	1	—	9	1	—	—
Mumps	—	—	1	1	2	1	1	11	2	—	—
Observation	—	—	—	1	1	1	—	12	1	—	—
	70	194	342	127	663	397	266	13365	647	27	59

TUBERCULOSIS

There were 50 notifications in respect of Tuberculosis during 1936. Of this number 26 were notifications of Pulmonary cases and 24 were in respect of Non-Pulmonary cases. The particulars as to age and sex of the patients notified can be seen in Table No. 16.

Of the 26 patients notified as suffering from Pulmonary Disease 21 were removed to a Sanatorium, and 20 of the 24 patients notified as suffering from the Non-Pulmonary form of the disease were dealt with in a similar manner. In the case of one patient notified as suffering from Pulmonary Tuberculosis the diagnosis was not confirmed.

Most of the patients suffering from Pulmonary Tuberculosis continue to be treated in Glenafton and Kaimshill Sanatoria. The majority of Non-Pulmonary cases are treated at St. Andrew's Home, Millport.

During the year 55 patients were referred for X-Ray examinations at Kilmarnock Infirmary.

At the end of the year there were 229 persons on the Tuberculosis Register, 0.6% of the population of the Burgh. Of the 229 persons 148 were Pulmonary cases and 81 Non-Pulmonary cases.

There is no doubt that Pulmonary Tuberculosis has fallen greatly in incidence in the last 60 years. The number of deaths from the disease is now less than one-third of what it was then. It is generally agreed that the fall has been due to the improved general social and economic conditions of the masses of the people, fostered by the Anti-Tuberculosis campaign. The two social factors of most importance are nutrition and housing, and wherever possible steps have been taken to improve the housing conditions of persons suffering from the disease in the Burgh. On 15 occasions during the year families have been transferred to a new house in one or other of the municipal schemes.

There were 22 deaths from Pulmonary Tuberculosis during the year, and when it is noted that at the Age Groups, 15 to 25 years, 25 to 35 years, and ~~35 to 45 years~~, this disease was the largest individual cause of death, it will be appreciated that however much has been done in the past there is a great deal more to do in the future, before matters can be considered satisfactory.

There were 8 deaths from Non-Pulmonary Tuberculosis. A considerable number of cases of this disease are due to milk infections, and we shall continue to get cases until such time as we have a really safe milk supply in our town.

The following Table gives particulars of the home visiting done during the year :—

TABLE No. 14.

	Districts.				Total
	1	2	3	4	
Number of cases visited (after notification)	13	7	3	12	35
Number of old cases visited ...	59	69	39	51	218
Observation cases, etc.	3	3	2	1	9
Total visits to all cases	195	192	82	132	601

TABLE No. 15.

There follows a Table representing the work of the Tuberculosis Dispensary :—

	Number Attended.		Attendances.	
	Male.	Female.	Male.	Female.
New cases	9	10	25	45
Old cases	18	30	83	170
Observation cases or contacts	9	4	30	7
	36	44	138	222

During the year 37 patients received Domiciliary Treatment.

The following Table gives particulars of the notifications during the year :—

TABLE No. 16.

		Age Groups.									Number of cases notified during year in which Diagnosis of Tuberculosis has been confirmed.	
		Under 5	5 and under 10	10 and under 15	15 and under 25	25 and under 35	35 and under 45	45 and under 65	65 and over	Total	Under 15	15 and over
Pulmonary	...	—	1	3	4	—	2	2	1	13	3	9
do.	...	—	2	—	2	6	3	—	—	13	2	11
Non-Pulmonary		3	2	1	7	2	1	—	—	16	6	10
do.		3	2	2	1	—	—	—	—	8	7	1

The Table which follows shows the arrangements for institutional treatment for 1936 :—

TABLE No. 17.

		In Institutions on January 1st	Admitted during the year.	Discharged during the year.	Died in Institutions.	In Institutions December 31st
Pulmonary	...	8	22	12	8	10
	Adults—Males	9	18	13	6	8
	Females	4	2	4	—	2
do.	Children—Males	4	3	4	1	2
	Females					
Non-Pulmonary	...	4	9	5	2	6
	Adults—Males	5	1	3	—	3
	Females	4	3	3	1	3
do.	Children—Males	7	7	4	—	10
	Females					
	Total . . .	45	65	48	18	44

44 cases received treatment in Kaimshill Sanatorium.
 29 do. do. Glenafton Sanatorium.
 30 do. do. St. Andrew's Home, Millport.
 2 do. do. Biggart Home, Prestwick.
 6 do. do. Other Institutions.

TABLE No. 18.

The following Tables show the number of persons in the Area at 31st December, 1936, who were known to be suffering from Tuberculosis.

Age Groups.										
		Under 5	5 and under 10	10 and under 15	15 and under 25	25 and under 35	35 and under 45	45 and under 65	65 and upwards	Total
PULMONARY—										
1. Sputum not present	{ Males	2	—	7	—	1	1	1	—	12
	{ Females	—	6	2	5	2	—	—	—	15
2. Sputum present but not examined	{ Males	—	—	—	—	—	—	—	—	—
	{ Females	—	—	—	—	1	—	—	—	1
3. Sputum examined and Tubercle Bacilli found	{ Males	—	—	1	6	5	7	8	—	27
	{ Females	—	—	1	8	11	5	1	—	26
4. Sputum examined and Tubercle Bacilli never found	{ Males	—	—	3	9	5	8	8	1	34
	{ Females	—	1	1	18	4	6	3	—	33
PULMONARY TOTAL		2	7	15	46	29	27	21	1	148

TABLE 18 (CONTINUED).

Age Groups.										
	Under 5	5 and under 10	10 and under 15	15 and under 25	25 and under 35	35 and under 45	45 and under 65	65 and upwards	Total	
NON-PULMONARY—										
1. Abdominal	1	4	4	—	—	—	1	—	10	
...	1	2	6	2	3	—	1	—	15	
2. Spine	—	—	1	—	—	—	—	—	1	
...	—	—	—	3	1	—	—	—	4	
3. Bones and Joints (exclusive of Spine)	1	4	—	3	1	1	—	—	10	
...	—	5	1	2	1	—	2	—	11	
4. Superficial Glands	1	2	4	2	2	1	—	—	12	
...	1	1	3	2	3	—	—	—	10	
5. Lupus	—	—	—	1	—	—	—	—	1	
...	—	—	1	—	—	—	—	—	1	
6. Other Parts or Organs	—	—	1	3	1	1	—	—	6	
...	—	—	—	—	—	—	—	—	—	
NON-PULMONARY TOTAL	5	18	21	18	12	3	4	—	81	
PULMONARY AND NON-PULMONARY TOTAL	7	25	36	64	41	30	25	1	229	

TABLE No. 19.

Return of number of persons who died from Tuberculosis in the Area during the year 1936, with particulars as to period elapsing between notification and death, and between discharge from an Institution and death :—

	Pulmonary.		Non-Pulmonary.	
	Males.	Females.	Males.	Females.
Number of persons who died from Tuberculosis	12	10	5	3
Of whom—				
Not notified or notified at or after death ...	1	1	3	1
Notified less than 1 month before death ...	3	1	2	2
„ from 1 to 3 months before death ...	—	—	—	—
„ from 3 to 6 months before death ...	2	1	—	—
„ from 6 to 12 months before death	—	3	—	—
„ from 1 to 2 years before death ...	1	1	—	—
„ over 2 years before death ...	5	3	—	—
Number who died within 28 days after discharge from an Institution	—	—	—	—
Number who died more than 28 days after discharge from an Institution	1	1	—	—

KAIMSHILL SANATORIUM

The Staff includes :—

- The Matron.
- 1 Sister.
- 1 Staff Nurse.
- 3 Probationers.

The Medical Officer of Health acts as Medical Superintendent.

At the beginning of 1936 there were 16 patients in residence, 13 from the Burgh and 3 from the County. During the year 42 further patients were admitted, 31 from the Burgh and 11 from the County.

Table No. 20 sets out in detail the particulars of the patients admitted, the patients discharged and the number of deaths.

Tuberculin treatment, by the same method as was used last year, was administered to five patients. Of this number two were suffering from Pulmonary disease. One of these patients improved considerably and was fit for discharge before the end of the year. The second patient, a very advanced case, did not improve on the treatment. The other three cases were suffering from Non-Pulmonary disease, and the following are particulars of these cases :—

Male	...	Bladder	...	...	Improvement continued.
Female	...	Glands of Neck	...	...	Apparently cured.
Male	...	Bone	...	...	Very much improved.

Pneumo-Thorax was induced in two patients during the year, and a further three patients attended periodically for refills during the year, having had the original collapse carried out prior to 1936. The following gives details of the state of these patients at the end of the year :—

Male	...	Induced	...	...	Much improved.
Female	...	Induced	...	...	Very much improved.
Female	...	Refills	...	...	Keeps well.
Male	...	Refills	...	...	Keeps well.
Male	...	Refills	...	...	Apicolysis carried out—keeps well.

Arrangements for X-Ray examinations are made with the local Infirmary, and during the year 20 patients in the Sanatorium were X-Rayed in this way.

13 patients had dental treatment during the year.

As has been indicated in previous years no effort is spared to make the patients as contented as possible during their stay, and we are again indebted to the workers of the Kaimshill Mission and other helpers who have from time to time during the year arranged entertainments for the patients. In the Summer the Putting and Croquet Greens were of great value in providing pleasant recreation for many of the patients.

During the year the entrance roadway to the Sanatorium was completely resurfaced.

TABLE No. 20.

There follows a Table showing particulars of the admissions and discharges to Kaimhill Sanatorium during the Year :—

	ADMISSIONS.				DISCHARGES.				Deaths.		Number in Hospital, 31/12/36.									
	1 and under 5.		5 and under 15.		15 and over.		Total.					Improved.		Not Improved.		Total.				
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.					
BURGH—																				
Pulmonary ...	4	3	—	—	2	3	13	11	15	14	5	7	2	1	7	8	5	4	7	5
Non-Pulmonary ...	3	3	—	—	—	—	2	—	2	—	1	1	1	2	2	3	1	—	2	—
COUNTY—																				
Pulmonary ...	1	2	—	—	—	—	6	4	6	4	2	4	2	1	4	5	1	—	2	1
Non-Pulmonary ...	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	1	—

MATERNITY AND CHILD WELFARE

Staff.

For the work in the Burgh Maternity Home the Staff consists of :—

- The Matron.
- 1 Sister.
- 3 Staff Nurses.
- 2 Probationers.

The Clinic Work and Out-door Visiting is done by four Health Visitors, each of whom is responsible, as far as possible, for all types of visitation in her own district.

The Matron assists at the Ante-Natal Clinic.

The Medical Officer of Health acts as Medical Superintendent of the Burgh Maternity Home and supervises directly the work of the Health Visitors.

The Maternity Home and Clinics are situated in the Centre at Green Street, where, in addition, there is a Workroom for Voluntary Workers.

The Work of the Maternity Home.

13 beds are provided. During the year there were 465 patients admitted to the Home. 426 confinements took place—430 babies being born. This number (426) shows a decrease of 20 over the figures for 1935, but this is largely due to the Home being closed for disinfection and repainting for a period of three weeks in March, 1936.

There were altogether 984 births notified in the Burgh in 1936, and the figure 430 represents almost 44% of the total.

During the year patients had to be referred to Kilmarnock Nursing Home on account of the Burgh Maternity Home being full when the confinements became due.

The fees collected in the Burgh Maternity Home during the year amounted to £1,024 2s 6d.

The following Table shows the percentage of the total births which have taken place in institutions in recent years :—

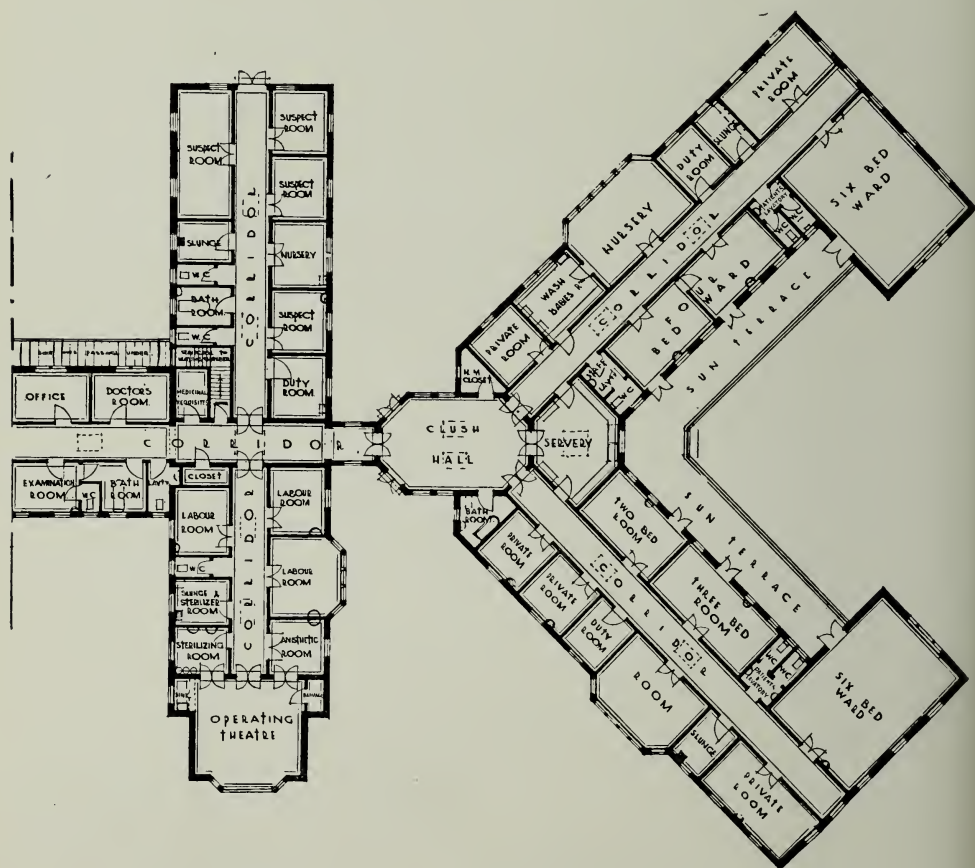
TABLE No. 21.

Year.	Total Number of Births Notified.	Births Occurring in Institutions.	
		Number.	Percentage of Total Births Notified.
1932 	854	447	52·3%
1933 	879	507	57·7%
1934 	876	540	61·6%
1935 	863	560	65·0%
1936 	984	593	60·0%

The building of the new Burgh Maternity Hospital was begun during the year, and considerable progress had been made by the end of the year. The buildings are in Holmes Road, where formerly the Dairy School for Scotland was housed. The old buildings were found to be suitable, after adaption and extension, for the administration block, and entirely new premises for patients are being erected immediately adjoining the old premises.

The buildings when completed will contain 32 beds for patients, with ample labour beds, an operating theatre and a suspect block.

An idea of the patients' accommodation is conveyed in the plan inserted below.



During the year 1936, 16 patients with serious complications were conveyed to Glasgow and admitted to the Maternity Hospital there. Nine of these patients were admitted to the Ante-Natal Wards.

TABLE No. 22.

Conditions.	No. of Cases.
Contracted Pelvis	4
Eclampsia	3
Hyperemesis Gravidarum	2
Heart Disease	1
Pyelitis	1
High Blood Pressure	1
Albuminuria	1
Placenta Praevia	1
Ante-Partum Haemorrhage	1
Retained Placenta	1

Summary of Work of the Home.

Number of confinements, 426. Number of babies born, 430.

Normal confinements, 344 { 46 with Doctor.
298 without medical attendance.

Abnormal or complicated confinements, 82 { 69 Instrumental Deliveries.
13 Other Deliveries.

Number of women having ante-natal care at clinic	385
--	-----	-----	-----

Number of women admitted for ante-natal care (albuminuria, high blood pressure, etc.)...	14
--	-----	-----	-----	-----	-----	----

Number of maternal deaths	1
---------------------------	-----	-----	-----	-----	-----	-----	---

Number of maternal deaths in women confined in the Home but occurring elsewhere, e.g., Isolation Hospital	2
---	-----	-----	---

Number of still-births	13
------------------------	-----	-----	-----	-----	-----	-----	----

The percentage of instrumental deliveries during the year was 20·1. This is to be compared with an average rate for the years 1931-35 (inclusive) of 17·9%.

Notification of Births Act.

The duty of notifying a birth is placed upon the parents, medical attendant, and midwife, and notification must be made within 36 hours of the occurrence of the birth. Only one of the above need notify, and the others need not, if they have reason to believe that a notification has already been sent.

During 1936 five births registered failed to be notified.

The total number of notified births, including still-births, was 984, being 121 more than last year. 391 or 39·7% of these births occurred in the patients' homes. 426 or 43·3% occurred in the Burgh Maternity Home, and the remaining 167 or 17% occurred in other Institutions.

		Male.	Female.	Total.
(a) Number of Births Registered	{ Legitimate ...	426	397	823
	{ Illegitimate ...	19	27	46
(b) Number of Births Notified	{ Live Births ...	...	...	951
	{ Still-Births ...	...	...	33
(c) Number Attended by Doctors	... ..	...	...	316
Number Attended by Midwife	... ..	...	...	490
Number Attended by Doctor and Midwife	... ..	...	...	178

Infantile Mortality.

During 1936, 72 deaths occurred in infants, *i.e.*, children under one year of age. Of this number 38 occurred in children under the age of one month. This last figure, representing the Neo-Natal Mortality, remains very high.

The various conditions causing death are to be found in the Table which follows. As was the case last year, prematurity was again by far the largest cause of death. It accounted for 25 deaths in 1935 and 26 in 1936.

The second largest cause of death was Disease of the Respiratory Tract, Pneumonia being the cause of death on 11 occasions, and Bronchitis accounting for the deaths of a further 6 babies.

The Infantile Mortality Rate was 83 as against 82 for 1935, 79 for 1934, 78 for 1933, 84 for 1932, 69 for 1931, and 89 for 1930. The trend of the Infantile Mortality Rate is disquieting, for whilst it does not compare unfavourably with the rates in other similar towns in Scotland it is difficult to know why it should remain so much higher than it is in most towns of similar size in England.

The high Prematurity Rate suggests that there must be some defect in the health of the mother, often undetectable, and it is felt that further efforts to improve the nutrition of the prospective mother might lead to more satisfactory results.

Premature Babies Investigation.

The question of premature births was again investigated during the year. The investigation took the form of an enquiry into the age of the mother, place in the family of the child, type of delivery, time since the last delivery, incidence of any previous forceps delivery. There was not found to be any significant difference between premature and normal births in any of the above conditions.

TABLE No. 23.

INFANTILE DEATHS.

Cause of Death.	Under 1 week.		1 and under 4 weeks.		1 and under 3 months.		3 and under 6 months.		6 and under 12 months.		Total.		Grand Total.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Prematurity ...	9	10	3	1	1	1	—	1	—	—	13	13	26
Pneumonia ...	1	—	2	—	2	—	1	1	2	2	8	3	11
Bronchitis ...	—	—	1	1	—	1	—	3	—	—	1	5	6
Gastro Enteritis ...	—	—	3	—	1	—	1	—	—	1	5	1	6
Congenital Debility...	2	—	1	—	—	2	—	—	—	—	3	2	5
Icterus Gravis ...	1	1	—	—	1	—	—	—	—	—	2	1	3
Convulsions ...	—	—	—	—	—	2	1	—	—	—	1	1	3
Tubercular Meningitis ...	—	—	—	—	—	—	—	—	1	1	1	1	2
Cerebro-Spinal Meningitis ...	—	—	—	—	—	—	1	—	—	1	1	1	2
Cellulitis ...	—	—	—	—	1	1	—	—	—	—	1	1	2
Asphyxia ...	—	1	—	1	—	—	—	—	—	—	—	2	2
Marasmus ...	—	—	—	—	—	—	1	—	—	—	1	—	1
Whooping Cough ...	—	—	—	—	—	—	—	1	—	—	—	1	1
Acute Meningo-Encephalitis	—	—	—	—	—	—	1	—	—	—	1	—	1
Paralytic Ileus ...	—	—	—	—	—	—	—	—	1	—	1	—	1
	13	12	10	3	6	7	6	6	4	5	39	33	72

Maternal Mortality.

During 1936 there were 8 actual deaths in women due to or associated with pregnancy. The causes of death, as stated on the death certificates, were :—

- (1) Pelvic Abscess ; General Peritonitis.
- (2) Puerperal Fever.
- (3) Scarlet Fever ; Septicaemia.
- (4) Abortion ; Post Abortive Sepsis.
- (5) Acute Pulmonary Oedema.
- (6) Puerperal Fever.
- (7) Mitral Stenosis ; Acute Endocarditis ; Eclampsia.
- (8) Hernia (large Irreducible Umbilical), 16 years ; Shock.

It will be seen that no fewer than five of the above deaths were connected with infections. The first death occurred in an Institution outwith the Burgh, and the first knowledge gained of this case was the transfer of the death notice. In case 2 there was a difficult labour with a large baby. In case 4 there had been excessive haemorrhage before the help of a Doctor was sought.

Cases 2 and 3 occurred in connection with the outbreak of Puerperal Infection in the Burgh Maternity Home in the early months of the year.

It is extremely difficult to class Puerperal Deaths into "preventable" and "non-preventable." There was certainly lack of co-operation on the part of the patient and friends in case No. 4 in as much as the woman was blanched with haemorrhage of five days duration before treatment was sought. This death might be classed as "preventable." Case 5 was definitely "non-preventable." With regard to the other four deaths it is more difficult to give an opinion. Cases 1, 2 and 3 had everything possible done for them. In case 6 there was a poor home and the mother had indifferent care during the pregnancy and early puerperium.

In February, 1936, a Report on the Local Maternity Services was made to the Local Authority as requested by the Department of Health in their circular of December, 1935.

In the Report the present position of these services was given under the headings—Ante-Natal, Intra-Natal, and Post-Natal. The work of the Burgh Maternity Home since its inception in 1925 was reviewed, and the following is an outline of suggested policy :—

The future Maternity Services will centre around the new Burgh Maternity Hospital. There provision will be made for all cases requiring or desirous of having Hospital treatment.

It is the intention to appoint a Resident Obstetrician, and it would be necessary to appoint a Consulting Obstetrician who could be called in when required.

There will be a sufficiency of beds for all Ante-Natal cases requiring observation and treatment. Clinics will be held at the present Clinic Centre and at the Hospital, and an attempt will be made to secure the co-operation

of the mothers by suitable propaganda and intensive visiting by Health Visitors in order that a number approaching 100% will avail themselves of Ante-Natal care, whether at the Clinics or at the surgeries of the private practitioners. In considering whether a voluntary notification of pregnancy would be of value, it is felt that patients who would be willing to have their pregnancies notified would be the individuals who would be most likely to submit to Ante-Natal care. It would be different in the case of statutory notification, but probably this should be reserved for a later stage, if the Maternal Mortality Rate did not lessen as a result of other factors.

Probably between a half and two-thirds of the births in the town will occur in the Burgh Maternity Hospital in the future. This will leave about 300 to 350 births to occur outside in the homes of the patients. Of this number it might be estimated that in the neighbourhood of 100 will be served by their own Doctor (private practitioner) as at present. This will, of course, continue, and it will be the endeavour of the Health Department to maintain a close association between the private practitioners and the Hospital. The remaining number of births, say 200, will be attended in the homes by Midwives. I am of opinion that serious consideration should be given to taking this work out of the hands of the Midwives on the district by compensating them and forbidding any further women to practise on their own as Midwives. I am of opinion that the most satisfactory method of dealing with the problem of Midwives' cases would be to appoint Local Authority Midwives, who would reside in or near the Maternity Hospital—who would be provided with board in the Institution and paid a salary of approximately that of a Sister in the Institution, *e.g.*, £90 - £110 per annum. These appointments would attract fully trained Nurses with the C.M.B. Certificate—a steady livelihood would be provided and proper off-duty time could be arranged. These Nurses would be of necessity in the closest association with the work of the Hospital.

It is the intention that, in cases of serious complication in a patient being attended in her house by either her own Doctor or the Local Authority Midwife, a "flying squad" consisting of the Resident Obstetrician, with Trained Nursing help drawn from the Staff of the Institution, together with sterile dressings, apparatus for Transfusion, etc., should be available to be rushed to the help of the Doctor or Midwife, where they felt that danger would arise by removing the patient to Hospital.

A Private Practitioner should have the right to call in the Consulting Obstetrician to any patient he is attending, provided that the patient is unable to afford to call in the Consultant privately.

Cases of Sepsis would continue to be treated at Kirklandside Hospital, but the advice of the Consultant would be available to the Medical Officer of Health in cases of difficulty.

With regard to Post-Natal care this would be greatly developed. Patients confined in the Hospital, and by the Local Authority Midwives on the district, would be referred for routine Post-Natal examination, in order that necessary repair operations could be advised and arranged for without undue delay, and unnecessary invalidism or periods of sub-normal health be reduced to a minimum. It would be advantageous to have a definite arrangement with, say, The Glasgow Royal Samaritan Hospital, in order that definite provision could be made for the admission of patients from the Burgh without delay.

One further point calls for comment. A number of deaths occur in women in whom the pregnancy should never have been allowed to have occurred on account of the poor condition of their health—say, from such conditions as severe Heart Disease, severe Kidney Disease, or Pulmonary Tuberculosis. For these women the Local Authority should make provision that they may be given the benefit of medical advice on the control of conception.

With reference to the above paragraph the Local Authority decided in October to make provision for medical advice on the control of conception to women in whom pregnancy was contra-indicated on medical grounds, this to be done meantime by referring suitable cases to the Clinic held by the Women's Welfare Association at 123 Montrose Street, Glasgow, the Corporation to be responsible for the fee in each case. Up till the end of the year two women had been referred.

Midwives (Scotland) Act, 1915.

During the year frequent inspection of Midwives' Instruments, Bags and Records were made.

The following is a list of Midwives who notified their intention to practice during the year 1936 :—

Name and Address.	No. of Certificate	Qualification
Biagi, Miss V., 23 Portland Road	10280	Trained
Cossar, Mrs. J., Burgh Maternity Home	9191	Trained
Dunlop, Mrs. E., 19 Waterside Street	1928	Bona-fide
Dunnelly, Mrs. G., 27 Hill Street	3381	Bona-fide
Irving, Mrs. A. B., Kilmarnock Nursing Home	2087	Trained
Jarman, Mrs. I., Nurses' Cottage, Crosshouse	8009	Trained
Kearney, Miss E., Burgh Maternity Home	9380	Trained
Kissock, Mrs. J., 42 Fullarton Street	544	Trained
McCreath, Miss M. B., Burgh Maternity Home	7805	Trained
McWilliams, Miss M., Burgh Maternity Home	8804	Trained
Phillips, Mrs. C., 12 Irvine Road	3382	Bona-fide
Smith, Mrs. M., 70 Dean Street	4700	Trained
Stewart, Mrs. E., 15 Langland Street	3679	Bona-fide
Whittingham, Miss M., Burgh Maternity Home	12194	Trained
Wilson, Mrs. L. F. B., Burgh Maternity Home	9601	Trained

The Midwives employed at the Burgh Maternity Home do not engage in any outside practice.

In accordance with the Rules of the Central Midwives' Board for Scotland, Midwives may send for the assistance of a Medical Practitioner in a case of emergency or difficulty, and the fees specified according to the services rendered are paid by the Local Authority, who are empowered to recover such fees from the persons concerned.

During 1936 there were 118 emergency calls as under :—

TABLE No. 24.

Conditions.						No. of Cases.
Lacerated Perineum...	...	...	...	...	...	45
Difficulty in Labour	...	...	...	...	...	15
Contracted Pelvis	...	...	...	...	...	9
Premature Birth	...	...	...	...	...	6
Prolonged Second Stage	...	...	...	...	...	5
Retained Placenta	...	...	...	...	...	5
High Temperature	...	...	...	...	...	5
Ante-Partum Haemorrhage	...	...	...	...	...	5
Breech Presentation...	...	...	...	...	...	4
Face Presentation	...	...	...	...	...	3
Persistent Occipito-Posterior	...	...	...	...	...	2
Uterine Inertia	...	...	...	...	...	2
Post-Partum Haemorrhage...	...	...	...	...	...	2
Eclampsia	...	...	...	...	...	2
Embarrassment of Child	...	...	...	...	...	2
Prolapse of Cord	...	...	...	...	...	1
Malpresentation	...	...	...	...	...	1
Whitlow	...	...	...	...	...	1
Septic Sores on Leg	...	...	...	...	...	1
Haemorrhoids	...	...	...	...	...	1
Hemiplegia	...	...	...	...	...	1
TOTAL	...	...	...	...	...	118

TABLE No. 25.

MIDWIVES (SCOTLAND) ACT, 1915.

BIRTHS.

Total number of births notified during 1936.	Total number of deaths of new born children within ten days).	Actual number of births attended by Midwives.	Actual number of deaths of new born children (within ten days) occurring in the practice of Midwives.	Actual number of cases not attended by a Doctor or Midwife.	
				Births.	Deaths.
984	30	490	10	—	—

CASES OF OPHTHALMIA NEONATORUM.

Total number of cases during 1936.	Actual number of cases occurring in the practice of Midwives.	Actual number of cases occurring where confinement not attended by a Doctor or Midwife.	
		—	—
2	—	—	—

CASES OF PUERPERAL SEPSIS.

Total number of cases during 1936.	Total number of deaths.	Actual number of cases occurring in the practice of Midwives.	Actual number of deaths occurring in the practice of Midwives.	Actual number of cases occurring where confinement not attended by a Doctor or Midwife.	
				Cases.	Deaths.
12	2	7	1	—	—

TABLE No. 25 (CONTINUED).
CASES OF PUERPERAL PYREXIA.

Total number of cases during 1936.	Total number of deaths.	Actual number of cases occurring in the practice of Midwives.	Actual number of deaths occurring in the practice of Midwives.	Actual number of cases occurring where confinement not attended by a Doctor or Midwife.	
				Cases.	Deaths.
15	—	4	—	—	—

CASES OF STILL-BIRTHS (DEAD BORN CHILDREN).

Total number of cases during 1936.	Actual number of cases occurring in the practice of Midwives.
33	14

As will be seen from Table No. 25 Midwives actually attended at 490 births. In connection with these cases 10 babies died within 10 days of birth, 7 cases developed Puerperal Sepsis, and 4 cases Puerperal Pyrexia. Of the 33 cases of Still-births 14 occurred in the practice of Midwives.

Notifications from Midwives.

The following notifications were received during the year :—

Sending for Medical Assistance	...	...	...	118
Still-Birth Notifications	...	...	...	8
Notification of Source of Infection	...	...	...	2
Notification of Intention to Practice	...	...	...	15

General Report on the Working of the Acts.

The slight general improvement in conditions noted in previous years has been maintained.

Work under the Acts has been in a very similar state to that noted during the last few years. There are still women who book their Midwife far too late in the pregnancy and frequently there is no time to have proper Ante-Natal care carried out before the women go to term. On one occasion during the year the records of a Midwife in practice were referred to the Central Midwives' Board for their observations.

Ante-Natal Consultations.

TABLE No. 26.

ANTE-NATAL AND POST-NATAL CLINICS.

	Ante-Natal.	Post-Natal.
Number who Attended	385	4
Number of Attendances	966	9

It will be seen from the above Table that 385 women attended the Ante-Natal Clinic during 1936. Of this number 85 were under care at the beginning of the year, so that 300 attended for the first time during the year. Of the 385 women (158 were Primiparae) who attended during the year 55 were still under care at the end of the year, 3 were found to be non-pregnant, and the following Table is a record of the 327 who were confined during 1936 in regard to where confinements took place :—

TABLE No. 27.

Burgh Maternity Home	...	...	...	...	248
At Home	...	...	...	...	57
Glasgow Royal Maternity Hospital	...	...	...	...	8
Kilmarnock Nursing Home	...	...	...	...	13
Seafeld Hospital, Ayr	...	...	...	...	1

Of the 248 women who were confined in the Burgh Maternity Home 213 had normal confinements, while 35 cases required the attendance of a medical practitioner.

With regard to the patients attending the Ante-Natal Clinic during 1936 the following is a note of the abnormal conditions found :—

High Blood Pressure	...	...	...	...	...	52
Low Blood Pressure	...	...	...	...	...	7
Albuminuria	...	...	...	...	...	6
Varicose Veins	...	...	...	...	...	5
Albuminuria and High Blood Pressure	...	...	...	...	...	5
Pyelitis	...	...	...	...	...	5
Anaemia	...	...	...	...	...	4
Gonorrhoea	...	...	...	...	...	4
Asthma, Bronchitis, etc.	...	...	...	...	...	3
Breech Presentation	...	...	...	...	...	3
Cardiac Conditions	...	...	...	...	...	2
Laryngitis...	...	...	...	...	...	2
Pulmonary Tuberculosis	...	...	...	...	...	2
Contracted Pelvis (due to Rickets)	...	...	...	...	...	2
Scabies	...	...	...	...	...	2
Toxic Vomiting	...	...	...	...	...	1
Chronic Appendicitis	...	...	...	...	...	1

Dental Caries, Constipation, Heartburn, Oedema of the Legs due to Pressure, etc., were also found in a number of cases.

In two cases where Breech Presentation was diagnosed external version was performed under general anaesthesia.

THE WORK OF THE HEALTH VISITORS

TABLE No. 28.

HOME VISITATIONS.

	Districts.				Total.
	1.	2.	3.	4.	
INFANTS—					
Number of first visits (after notification of Birth) ...	178	221	175	193	767
Number of subsequent visits ...	1579	1367	1295	1209	5440
CHILDREN (1-5 Years)—					
Number of children visited ...	815	898	668	828	3209
Number of subsequent visits ...	2918	2582	2415	2206	10121
EXPECTANT MOTHERS—					
Number visited	74	65	56	25	200
Number of subsequent visits ...	117	107	99	28	351
STILL-BIRTHS—					
Number visited	9	9	6	5	29
CASES OF OPHTHALMIA NEONATORUM					
Number visited	—	1	—	1	2
MEASLES—					
Number visited	10	15	7	10	42
WHOOPING COUGH—					
Number visited	35	1	42	20	98
CHICKENPOX—					
Number visited	5	15	36	39	95

Feeding of above Infants :—

Breast	589
Partly Breast	83
Artificial	95

The housing conditions of the babies born to women normally resident in the Burgh during 1936 are shown in the following Table :—

TABLE No. 29.

Number of Rooms.	Number of Inmates.													
	2	3	4	5	6	7	8	9	10	11	12	13	14	Total
One Room ...	18	132	81	50	20	13	2	6	5	—	—	—	—	327
Two Rooms ...	8	58	62	31	32	14	17	8	4	1	2	—	—	237
Three Rooms ...	5	58	20	28	26	16	10	12	1	2	—	—	—	178
Four or more Rooms	3	1	6	5	4	3	4	1	2	6	3	1	2	41
Total	34	249	169	114	82	46	33	27	12	9	5	1	2	783

TABLE No. 30.

THE WORK OF THE CLINIC.

	Under 1 Year of Age.	Over 1 Year of Age.	Total.
Number of children who attended	255	132	387
Number of attendances made ...	416	306	722

TABLE No. 31.

THE CONDITIONS RECORDED WERE

	Districts.				Total.
	1.	2.	3.	4.	
Skin Conditions ...	50	9	10	8	76
Vaccination ...	46	20	14	6	86
Malnutrition ...	—	—	28	9	37
Digestive Disturbances ...	70	6	30	7	113
Ear, Nose and Throat Conditions	33	4	8	2	47
Rickets ...	3	2	2	3	10
Respiratory Affections ...	29	3	21	—	53
Enlarged Glands ...	6	4	5	2	17
Eye Conditions ...	14	3	8	—	25
Teething ...	4	2	6	2	14
Other Conditions ...	193	31	40	20	284
	448	83	172	59	762

Food and Milk.

As in past years milk was supplied for the use of infants and nursing mothers whose health conditions were unsatisfactory.

In the great majority of cases Certified Milk was supplied, but in a few cases certain of the Dried Milks, when for any reason whole milk was unsuitable, were supplied.

The following shows the number supplied :—

	<i>Mothers.</i>	<i>Children.</i>
1. Number of persons supplied with liquid milk, dried milk, milk substitutes, and other food preparations	13	344
2. Liquid milk—		
Total quantity supplied (galls.)	1447	9810
Grade—Certified.		
3. Dried milk and other milk substitutes—Trufood		
Total quantity supplied	45 lbs.	
4. Other food preparations—		
Cod Liver Oil	180 lbs.	
Virol & Virolax	756 lbs.	
Emulsion	100 lbs.	
5. Total cost to Local Authority	(2) £150 9 10	
	(3) 5 2 7	
	(4) 59 19 10	
	<hr/>	
	£215 12 3	
Amount recovered by L.A.	19 11 9	
	<hr/>	
	£196 0 6	
	<hr/>	

TABLE No. 32.

ULTRA-VIOLET RAY CLINIC.

	Under 1 Year of Age.	1-5 Years.	Total.
Number of children attending ...	15	63	78
Number of attendances	311	1000	1311

TABLE No. 33.

CONDITIONS TREATED WITH PROGRESS MADE.

Conditions.	Number.	Results.		Particulars of Treatment.		
		Improved.	Not Improved.	Still Attending.	Finished course of Treatment.	Number stopped course before completion.
Malnutrition, General Debility and Allied Conditions ...	33	23	10	7	15	11
Rickets and Incipient Rickets	2	2	—	1	1	—
Non - Pulmonary Tuberculosis	5	5	—	1	3	1
Enlarged Glands ...	2	1	1	—	1	1
Chest Conditions (Bronchitis, etc.) ...	24	22	2	8	8	8
Skin Conditions ...	2	2	—	—	2	—
Other Conditions ...	10	10	—	2	7	1
Total ...	78	65	13	19	37	22

Other Clinics.

TABLE No. 34.

	Total.
Number of Attendances for Dressings	278
Number of Attendances at Weighing Clinic	3100
Other Attendances	1743

Day Nurseries and Play Centres.

The remarks made in previous Reports still hold good. No progress has been made during the year under this heading.

Voluntary Workers.

The Voluntary Workers in connection with the Maternity and Child Welfare Scheme have continued to function with great success during 1936. The meetings were held on Tuesdays of each week. I should like to pay a tribute to the activities of the Voluntary Workers and assure them of the value of their services to the Department.

Ophthalmia Neonatorum.

A note on this disease has already been made under the heading of Notifiable Diseases.

NEUROLOGICAL AND PSYCHIATRIC SERVICE

There was nothing of note in the way of development of this service during 1936.

THE PUBLIC ASSISTANCE MEDICAL SERVICE

The Medical Officer of Health acts as Chief Public Assistance Medical Officer, and during the year the actual medical work has been carried on by the general practitioners in rotation.

A Doctor attends daily at 10.30 a.m. and 4.45 p.m. at the Public Assistance Office for the purpose of seeing patients and issuing any necessary certificates. Visits to the homes of persons requiring medical treatment are made as required.

The arrangements for home nursing with the local Nursing Association continued as in past years and was much appreciated.

There is a moderate increase in the number of persons who received outdoor medical relief, and also in the number of persons who received institutional treatment.

The following figures show in detail the work done :—

TABLE No. 35.

	Male.	Female.	Children.	Total.
Number of persons who received outdoor medical relief ...	104	197	118	419
Number of persons who received institutional treatment ...	201	32	13	246
Total number of defects receiving medical attention				673
Number of visits made ... ..	...	...	...	835
Number of Medical Certificates signed ... ..	...	...	...	404
Number of Lunacy Certificates signed ... ..	...	...	...	12
Visits to Lunacy Cases under Guardianship ... ..		...	...	4
Institutional Treatment.	Male.	Female.	Children.	Total.
Number of cases admitted to Kilmarnock Infirmary ...	10	10	3	23
Number of cases admitted to Cuninghame Home ...	191	22	10	223
Number of cases X-Rayed at Kilmarnock Infirmary ...	5	3	—	8

CHILDREN AND YOUNG PERSONS (SCOTLAND) ACTS, 1908 AND 1932

During the year the Health Visitors continued to act as Visitors under the Children and Young Persons (Scotland) Act. Cases requiring visiting are reported to the Medical Officer of Health by the Public Assistance Officer, and reports are furnished to him through the Public Health Department.

The following Table gives the details of the work carried out during 1936 :—

TABLE No. 36.

	Districts.				Total.
	1.	2.	3.	4.	
New Cases	3	1	1	1	6
Visits to Old and New Cases	41	30	7	28	106

DIABETES

During the year 79,000 units of Insulin were supplied by the Department.

VACCINATION (SCOTLAND) ACTS, 1863 TO 1907

TABLE No. 37.

Successfully Vaccinated	97
Insusceptibility to Vaccine Disease—	
(a) Previous Successful Vaccination	2
(b) Constitutional Insusceptibility	2
Medical Certificate of Postponement	13
Died before Vaccination	4
Referred to other Districts	3
Statutory Declaration of Conscientious Objection ...	544
Cases Permanently written off	3

BLIND PERSONS (SCOTLAND) ACT

At the end of the year there were 28 men and 27 women on the Roll of Blind Persons in the Burgh. In addition there were 4 men on the Roll who belong to Kilmarnock but who at present live outwith the Burgh.

As in previous years the supervision of cases is undertaken by the District Teacher of the Mission to the Outdoor Blind for Glasgow and the West of Scotland, who works in co-operation with the Public Health Department locally.

THE SILICOSIS AND ASBESTOSIS (MEDICAL ARRANGEMENTS) SCHEMES, 1931 AND 1934

During the year, under the above Scheme, two persons were examined. In no case was it found necessary to certify the individual unsuitable for the employment he proposed to follow.

HOSPITAL AND AMBULANCE FACILITIES

The conditions with regard to the Hospital accommodation have not altered during the year, and may be said to be fairly adequate. Particulars are to be found in previous Annual Reports. During 1934 arrangements were made whereby certain cases for whom the Town Council of Kilmarnock was responsible would, when required, be treated in the Kilmarnock Infirmary. The details of the arrangements are in the Annual Report for 1934. The arrangement has worked very well during the year.

With regard to ambulance facilities two motor ambulances are provided by the Corporation at Kirklandside Hospital for acute infectious cases. An ambulance is provided by the Local Authority for the conveyance of persons suffering from Tuberculosis and also for general work in connection with the Public Health Department.

The Kilmarnock Infirmary provide two ambulances for the conveyance of general, medical and surgical cases.

VENEREAL DISEASES

The arrangements for the treatment of these diseases in the Burgh remain unaltered.

Male patients are seen at the Bank Street Centre on Tuesday evenings or at other times by arrangement. The premises are open each evening from Monday to Friday, and an Orderly is in attendance to supervise irrigation treatment. Arrangements are made for the supply of douching apparatus to those patients who cannot attend daily on account of distance, etc.

Female patients are treated at the Green Street Centre on Mondays and Thursdays, the main Clinics being held on the Thursdays.

The number of patients who attended for the first time during 1936 was 142, of whom 110 were males and 32 were females. These numbers represent an increase from the corresponding 1935 figures, mainly due to a rise in the number of male cases of Gonorrhoea, and in the number of cases attending with conditions other than venereal. The total number of attendances made by all patients at the Clinics was 5,115, an increase of almost 700 over the figures for last year.

Eight patients were admitted for in-patient treatment to Heathfield Hospital during the year, and one patient to the Glasgow Women's Hospital, Rottenrow.

In the year under consideration 10·4% of those patients who ceased treatment failed even to complete a course of treatment, whilst a further 29·1% completed a course of treatment but ceased attending before final tests of cure were carried out. Thus there was a total defaulter rate of 39·5%, a decrease of 7·9% over the figure for last year. The total defaulter rate for males was 38%, a figure almost identical with that for last year. The female defaulter rate this year was 44·1%. This figure is a considerable improvement over last year.

It is interesting to note that the latest available figures for defaulters for all Scotland were approximately 45% for both males and females.

Two patients died during the year when under treatment, but in no instance was the death in any way connected with the treatment or the disease.

Our experience generally during the year has borne out what has been found in past years, namely, that until some form of compulsion is brought into being the defaulter rate will continue to reach high figures.

TABLE No. 38.

RETURN OF CASES TREATED AT VENEREAL DISEASES CENTRE DURING 1936.

	Syphilis.		Gonorrhoea.		Soft Chancre.		Non-Specific Venereal.		Conditions other than Venereal.		Total.	
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
1. Persons under treatment at 1st January, 1936	22	23	17	22	—	—	1	—	1	—	41	45
2. Persons removed from Register any previous year who returned during the year for treatment of same infection ...	3	—	3	—	—	—	—	—	—	—	6	—
3. Cases in which treatment or observation was commenced during the year ...	3	7	84	15	—	—	7	—	16	10	110	32
TOTAL of Items 1, 2, and 3 ...	28	30	104	37	—	—	8	—	17	10	157	77
4. Persons who ceased to attend :— (a) Before completing treatment for ... (b) After treatment but before final tests as to cure of ...	1	1	8	4	—	—	—	—	—	—	9	5
5. Persons transferred to other Centres ...	8	4	21	6	—	—	—	—	—	—	29	10
6. Persons discharged after completion of treatment and observation for ...	2	1	34	3	—	—	5	—	15	10	56	14
7. Persons who died while under treatment ...	—	2	—	—	—	—	—	—	—	—	—	2
8. Persons still under treatment or observation at end of year for ...	17	22	35	21	—	—	3	—	2	—	57	43
TOTAL of Items 4, 5, 6, 7, and 8 ...	28	30	104	37	—	—	8	—	17	10	157	77
Number of attendances ...	378	435	3269	800	—	—	117	—	87	29	3851	1264

Examination of Pathological Material.	Microscopical.			Serum Tests.		C.S. Fluid Tests.	
	Spirochetes.	Gonococci.	Other Organisms.	Wassermann	Others.	Wassermann	Others.
(a) Specimens examined by the Staff of the Centre	—	30	—	—	—	—	—
(b) Specimens from persons attending the Centre which were sent for examination to an approved Laboratory ...	—	214	—	95	—	—	—

TABLE No. 39.

CASES CLASSIFIED ACCORDING TO THE AREA IN WHICH THE PATIENTS RESIDED.

Number of cases from each area dealt with during the year for the first time and found to suffer from :—	Burgh of Kilmarnock.	Ayr County.	Ayr Burgh.	Glasgow.	Motherwell.	Areas outside Scotland.	Total.
(a) Syphilis	5	5	—	—	—	—	10
(b) Gonorrhoea	56	36	2	3	1	1	99
(c) Soft Chancres	—	—	—	—	—	—	—
(d) Non-Specific Venereal Infections ...	3	4	—	—	—	—	7
(e) Conditions other than Venereal ...	18	8	—	—	—	—	26
Total	82	53	2	3	1	1	142
Total number of attendances of all patients residing in each area	3578	1401	53	40	40	3	5115
Number of doses of Arsenobenzol Compounds given in the Out-Patient Department ...	247	184	—	—	—	—	431

TABLE No. 40.

NEW CASES CLASSIFIED ACCORDING TO AGE.

	Syphilis.		Gonorrhoea.		Soft Chancres.		Non-Specific Venereal.		Total.		Congenital Syphilis.	
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
(a) Under 1 year	—	—	—	—	—	—	—	—	—	—	—	—
(b) 1 and under 5 years ...	—	2	—	—	—	—	—	—	—	3	—	2
(c) 5 and under 15 years ...	—	1	—	—	—	—	—	—	39	9	—	1
(d) 15 and under 25 years ...	—	4	36	8	—	—	3	—	55	10	—	1
(e) 25 years and upwards ...	3	—	48	6	—	—	4	—	—	—	—	—
Totals	3	7	84	15	—	—	7	—	94	22	—	4

CLINICS AND TREATMENT CENTRES

Maternity and Child Welfare (Kilmarnock Burgh).

Cases for admission to the Burgh Maternity Home may be booked at Green Street between the hours of 2-3 p.m. and on Saturday between 11-12 noon.

An Ante-Natal Clinic is held at Green Street every Monday afternoon at 2.30 p.m.

A Child Welfare Clinic is held at Green Street every Thursday afternoon at 3 p.m.

Ultra-Violet Ray Treatment Clinics are held on Mondays, 9-10 a.m.; Wednesday afternoons, 2-2.30 p.m.; and Fridays, 9-10 a.m.

A Weighing Clinic is held on Wednesday afternoons from 3-4 p.m., and on Thursday, 2-3 p.m.

Tuberculosis (Kilmarnock Burgh).

A Clinic for the examination of cases of Tuberculosis or of Contacts is held each Monday afternoon at 3.45 p.m. at Green Street.

Venereal Diseases (Kilmarnock Burgh).

A Clinic for females is held at Green Street each Thursday evening from 5 p.m. onwards. Cases are also seen on Monday evenings by arrangement.

A Clinic for males is held at 64 Bank Street on Tuesday evenings from 6.30 p.m. onwards. Cases are also seen on Friday evenings by appointment.

(The Clinic at Bank Street is open every evening from 7-9 p.m., Monday to Friday, for subsequent treatment. Female cases have subsequent treatment at Green Street by arrangement.)

School Clinic (Kilmarnock Burgh).

A Clinic is held daily at the Grammar School, Dundonald Road, for the treatment of minor ailments. The Assistant Medical Officer attends on Wednesday mornings for the examination of special cases.

AIR RAID PRECAUTIONS

The question of Air Raid Precautions was under consideration repeatedly during the year, and considerable progress was made in the evolution of a Scheme. About one-half of the medical practitioners in the town underwent a course of instruction in Anti-Gas Methods.

FACTORY AND WORKSHOPS ACTS, 1901

TABLE No. 41.

INSPECTION OF FACTORIES, WORKSHOPS, AND WORKPLACES.

	Number of		
	Inspections	Written Notices	Occupiers Prosecuted
Factories (including Factory Laundries)	—	—	—
Workshops (including Workshop Laundries)	145	1	—
Workplaces	—	—	—
Total	145	1	—

TABLE No. 42.
DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars.	Number of Defects.			Number of Offences in respect to which Prosecutions were instituted.
	Found.	Remedied.	Referred to H.M. Inspector.	
Nuisances under the Public Health Acts :—				
Want of cleanliness	12	12	—	—
Want of ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of drainage of floors	—	—	—	—
Other nuisances	—	—	—	—
Sanitary accommodation—				
Insufficient	—	—	—	—
Unsuitable or defective	1	1	—	—
Not separate for Sexes	—	—	—	—
Offences under the Factory and Workshops Acts :—				
Illegal occupation of underground bakehouse	—	—	—	—
Other offences	—	—	—	—
	13	13	—	—

METEOROLOGICAL STATISTICS, 1936

Rainfall.

The rainfall for the third year in succession was above the normal. During the year 42·28 inches of rainfall was recorded, which gave a 10% excess. During the year there were 147 dry days, and 167 of the remaining days could be classified as "wet days," *i.e.*, days with ·04 inch or more rainfall.

The rainfall of July with 6·09 inches gave the largest percentage above the normal. The figure represented 92% in excess, and during that month there were only eight dry days. The figure for July was the highest amount recorded in Kilmarnock for this month for fully 80 years. The largest fall, however, recorded during a month was for December, when 6·11 inches was recorded, which is 40% in excess.

After a wet January there were five consecutive months with falls under the normal, April being the lowest with 1·07 inches, which was 50% of the normal.

Three falls of 1 inch or more within 24 hours were recorded during the year. These were 1·35 inches on 24th October, 1·23 inches on 8th August, and 1·18 inches on 13th December.

The period from 19th January to 2nd February constituted a "rain spell," that is, rain fell during each of the 15 days. The total fall during the period was 1·93 inches. From 1st to 16th April only ·02 inch was recorded, and this period therefore was a "dry spell." The fifteen days from 27th September to 11th October was known as an "absolute drought." Each of the 15 days was dry. This was immediately followed by a "rain spell" of 18 days' duration, during which 4·26 inches of rain fell, and with only a break of one day—30th October was dry—a further spell of 17 days rain ensued, yielding an additional 3·06 inches of rain.

During the year there were 652 hours during which rain fell, the highest number of hours being recorded in December when the rain fell during 96·4 hours, and the lowest in April when 17·9 hours rainfall was recorded.

The average rate of fall for the year was ·1889 inch per rain day and ·0649 per hour.

Sunshine.

The total amount of sunshine recorded in 1936 was 1234·1 hours, which gave a daily average of 3·4 hours, a deficiency of 3%.

Again the month of May heads the list with the largest amount of sunshine. During that month 193 hours were recorded. The month with the greatest percentage above the normal, however, was April. During that month 180 hours were recorded, which was 30% above the normal. During March only 53·6 hours of sunshine were recorded, which was the lowest but one recorded during the last 35 years. The lowest figure was 50·2 hours in 1909.

The greatest day's sunshine was the 10th of June, with the remarkable figure of 15·2 hours. During the year there were 77 days on which no sun was recorded, while on 143 days the amount recorded was one hour or less.

Temperature.

The temperatures were again all above the normal, the mean shade temperature for the year averaging 47·9 degs. F., which is ·4 above the normal.

The year made a very cold start ; January and February being cool months with snow heavy and lying long in the second half of January. The figure for the first month has only been lower on three previous occasions.

The Spring was dry, April being cool due to excess of north to north-east winds, while the figure for May was the highest mean shade temperature since 1919.

The Summer months were all warmer than the average, though July just exceeded the normal. The temperature that month was reduced owing to the excess rainfall.

In the last quarter the November average was below the normal.

The temperatures in the ground were the lowest recorded since 1931.

The warmest day of the year was 19th June, when the temperature in the shade rose to 83·4 degs. F. The other extreme was on the 15th January, when the maximum day temperature just exceeded freezing point at 32·2 degs. F. The warmest night was that of 11th-12th September, when the temperature in the shade did not drop below 60·6 deg. F. On the night of the 12th-13th February the shade temperature was as low as 16·0 degs. F., while on this same night on the grass a temperature of 7·4 degs. F. was recorded, which was one of the lowest temperatures yet recorded in Kilmarnock.

A warm day is one on which the temperature exceeds 75·0 degs. F. Temperatures in excess of this figure were recorded on six days during 1936. In 1935 the number was 7, in 1934 24. Nights with a temperature of 57 degs. or more are classified as warm. For the past three years the number so classified has been 16. When the temperature does not rise above freezing point the day is considered to be a cold day, and from the figures already given it will be seen that every day in 1936 exceeded freezing point. In 1935 there were 5 such days. The night in which the temperature falls below 23 degs. is in the category of a "cold night." On 13 occasions the temperature fell below that point in 1936. The figures for 1935 were 10 and for 1934 7.

Once again North-East and South-West winds headed the list of the winds most frequently noted during 1936. North-East was noted on 77 mornings and South-West on 67. There were 36 days on which calms were recorded.

In 1936 snow fell on 13 days and was noted as being lying on 11 days. Hail was observed on 6 days, while fog was noted on a similar number of mornings. The number of times thunder was heard was 15, which is the highest recorded for some considerable time. Winds of gale force were recorded on 13 occasions during 1936. Ground frost was observed on 91 days, which was the highest number since 1932.

TABLE No. 43.

		Mean Shade Tem. perature. Deg. F.	Mean Shade Tem- perature. + or - Normal.	Rainfall.		Sunshine.	
				Inches.	%	Hours.	%
January	...	36.1	-3.0	4.17	114	37.2	113
February	...	37.7	-2.0	1.54	50	70.6	128
March	...	44.0	+2.9	2.35	80	53.6	50
April	...	43.4	-1.5	1.07	50	180.4	130
May	...	52.0	+1.1	1.76	76	193.1	103
June	...	57.3	+2.1	1.80	78	184.1	106
July	...	58.5	+ .1	6.09	193	137.8	83
August	...	59.3	+1.6	4.33	108	137.5	99
September	...	56.0	+2.5	3.81	121	97.5	82
October	...	48.8	+ .3	5.28	147	90.8	103
November	...	40.6	-1.0	3.97	102	33.3	85
December	...	41.2	+1.4	6.11	140	18.2	83
Year	...	47.9	+ .4	42.28	110	1234.1	97

